** PUBLIC DISCLOSURE COPY **

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

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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

<u>A</u>	For the	2021 calendar year, or tax year beginning J	UL 1, 2021 and	ending J	UN 30, 2022			
В	Check if applicable	C Name of organization THE COMMUNITY FOUNDATION OF			D Employer identi	fication number		
	Addres	S						
	Name change	5			31-099701	7		
	Initial	Number and street (or P.O. box if mail is not de	alivered to street address)	Room/suite	E Telephone numb			
F	return Fiṇal	325 W MAIN ST.	silvered to street address)	1110	502-585-464			
	☐return/ termin ated			G Gross receipts \$ 250,421,444				
	Ameno			H(a) Is this a group return				
	Applic		GALLO		for subordinate			
	pendir	SAME AS C ABOVE			H(b) Are all subordinates	—		
$\overline{\Gamma}$	Tax-exe	empt status: X 501(c)(3) 501(c) ((insert no.) 4947(a)(1)	or 527	1	a list. See instructions		
		e: WWW.CFLOUISVILLE.ORG			H(c) Group exempt			
K	Form of	organization: X Corporation Trust A	ssociation Other	L Year		M State of legal domicile; KY		
P	art I	Summary		•		-		
	1	Briefly describe the organization's mission or most	t significant activities: TO STR	ENGTHEN C	OUR REGION THROU	GH		
Governance		INSPIRED PHILANTHROPY AND OUTSTANDING						
rna	2	Check this box 🕨 🔲 if the organization disco	ontinued its operations or dispo	sed of more	than 25% of its net a	ssets.		
ove.	3	Number of voting members of the governing body	3	29				
		Number of independent voting members of the go						
8	5	Total number of individuals employed in calendar y	year 2021 (Part V, line 2a)					
Vi č i	6	Total number of volunteers (estimate if necessary)			<u>6</u>	33		
Activities &	7 a	Total unrelated business revenue from Part VIII, co						
_	b	Net unrelated business taxable income from Form	990-T, Part I, line 11			b 0.		
					Prior Year	Current Year		
ē	8	Contributions and grants (Part VIII, line 1h)	38,888,654	' ' '				
Revenue	9				1,819,078	 		
ě	10	Investment income (Part VIII, column (A), lines 3, 4		29,920,609				
_	111	Other revenue (Part VIII, column (A), lines 5, 6d, 8d		150	·			
		Total revenue - add lines 8 through 11 (must equal		70,628,491				
		Grants and similar amounts paid (Part IX, column (34,110,489	 			
		Benefits paid to or for members (Part IX, column (0 020 020	<u> </u>		
es	15	Salaries, other compensation, employee benefits (2,939,929			
Expenses	16a	Professional fundraising fees (Part IX, column (A),		704	0	0.		
ΩX	- b	Total fundraising expenses (Part IX, column (D), lin			1 746 069	2 140 677		
	''	Other expenses (Part IX, column (A), lines 11a-11d			1,746,068 38,796,486			
		Total expenses. Add lines 13-17 (must equal Part I			31,832,005			
	19	Revenue less expenses. Subtract line 18 from line	12		ginning of Current Year			
ots o	20	Total assets (Part X, line 16)			675,486,716			
Asse	21	Total liabilities (Part X, line 26)			25,647,275	' ' '		
Net Assets or	22	Net assets or fund balances. Subtract line 21 from	line 20		649,839,441			
P	art II	Signature Block	1 III 10 20					
Und	ler pena	Ities of perjury, I declare that I have examined this return	including accompanying schedule	s and stateme	ents, and to the best of r	ny knowledge and belief, it is		
		t, and complete. Declaration of preparer (other than offic			•			
			,					
Sig	n	Signature of officer			Date			
Hei		MATTHEW L. BACON, SENIOR VICE PRI	ESIDENT & CFO					
		Type or print name and title						
		Print/Type preparer's name	Preparer's signature		Date Check	PTIN		
Pai	d	THERESA BATLINER, CPA		0 !	5/09/23 self-emp	loyed P00543162		
Pre	parer	Firm's name MCM CPAS & ADVISORS LLP		Firm's EIN ▶ 27-1235638				
Use	Only	Firm's address > 462 SOUTH 4TH STREET SU	ITE 2600					
_		LOUISVILLE, KY 40202			Phone no. (5	02) 749-1900		
Ma	y the IF	RS discuss this return with the preparer shown abo	ove? See instructions			X Yes No		

Pa	rt 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 X 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 X 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 b	
	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
 4а	revenue, if any, for each program service reported. (Code:) (Expenses \$ 44,827,260. including grants of \$ 43,542,949.) (Revenue \$)	700,639.)
44	DISTRIBUTE CONTRIBUTIONS AND GRANTS TO 501(C)(3) ORGANIZATIONS	
	CLASSIFIED AS 509(A).	
	<u></u>	
4b	(Code:) (Expenses \$)
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 ► 44,827,260.	
		Form 990 (2021)

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)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		х
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? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	<u> </u>		
Ŭ	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	ل		
U	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		х	
-	\cdot	6	21	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			l
	Schedule D, Part III	8		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?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
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? If "Yes," complete Schedule D, Part VIII	11c		x
ч	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	· · · ·		
u		11d		x
_	Part X, line 16? If "Yes," complete Schedule D, Part IX		Х	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Λ	\vdash
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	-
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			l
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
=	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."			
	,	19		x
20-	complete Schedule G, Part III	20a		X
20a	• • •			
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		\vdash
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	ا ۾ ا	v	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	Х	

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THE COMMUNITY FOUNDATION OF LOUISVILLE, INC. Form 990 (2021) LOUISVILLE, INC.

Part IV Checklist of Required Schedules (continued) Page 4 31-0997017

			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? If "Yes," complete Schedule I, Parts I and III	22		Х			
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current						
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete						
	Schedule J	23	Х				
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the						
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete						
	Schedule K. If "No," go to line 25a	24a		х			
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b					
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease						
	any tax-exempt bonds?	24c					
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d					
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit						
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х			
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and						
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete						
	Schedule L, Part I	25b		х			
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? If "Yes," complete Schedule L, Part II	26		х			
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? If "Yes," complete Schedule L, Part III						
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):						
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>						
	"Yes," complete Schedule L, Part IV	28a		х			
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х			
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If						
	"Yes," complete Schedule L, Part IV	28c		х			
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х				
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation						
	contributions? If "Yes," complete Schedule M	30		х			
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х			
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete						
	Schedule N, Part II	32		х			
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations						
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х			
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and						
	Part V, line 1	34	Х				
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х				
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)? If "Yes," complete Schedule R, Part V, line 2	35b		Х			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?						
	If "Yes," complete Schedule R, Part V, line 2	36		Х			
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization						
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х			
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?						
	Note: All Form 990 filers are required to complete Schedule O	38	Х				
Pai	t 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	<u></u>					
			Yes	No			
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable						
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0						
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming						

	Check it Schedule O contains a response of 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	1a	60			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portab	ole gaming			
	(gambling) winnings to prize winners?			1c	х	

Form **990** (2021)

LOUISVILLE, INC.

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

			Yes	No						
2 a	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 29									
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х							
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	_								
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X						
	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		Х						
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		х						
_	5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?									
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?									
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с								
oa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	6a		x						
any contributions that were not tax deductible as charitable contributions?										
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?										
7	Organizations that may receive deductible contributions under section 170(c).	6b								
и а	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		х						
b	Annual Control of the	7b								
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7.5								
Ŭ	to file Form 8282?	7с		x						
d	If "Yes," indicate the number of Forms 8282 filed during the year									
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х						
_	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?									
g										
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?										
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the									
	sponsoring organization have excess business holdings at any time during the year?	8		х						
9	Sponsoring organizations maintaining donor advised funds.									
а	a Did the sponsoring organization make any taxable distributions under section 4966?									
b										
10	Section 501(c)(7) organizations. Enter:									
а	Initiation fees and capital contributions included on Part VIII, line 12									
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities									
11	Section 501(c)(12) organizations. Enter:									
а	Gross income from members or shareholders									
b	Gross income from other sources. (Do not net amounts due or paid to other sources against									
	amounts due or received from them.)									
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year									
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40-								
а	Is the organization licensed to issue qualified health plans in more than one state?	13a								
h	Note: See the instructions for additional information the organization must report on Schedule O.									
D	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									
_	organization is licensed to issue qualified health plans Enter the amount of reserves on hand 13b 13c									
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х						
	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?	15		х						
	If "Yes," see the instructions and file Form 4720, Schedule N.									
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х						
If "Yes," complete Form 4720, Schedule O.										
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?	17								
	If "Ves." complete Form 6069									

LOUISVILLE, INC. Form 990 (2021)

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			X							
Sec	tion 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.										
b	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?	2		Х							
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?	3		X							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	<u>4</u> 5		X							
5	· · · · · · · · · · · · · · · · · · ·										
6	Did the organization have members or stockholders?	6		Х							
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?	7a		Х							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or										
•	persons other than the governing body?	7b		Х							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	0-	Х								
a	The governing body?	8a	X								
ь	Each committee with authority to act on behalf of the governing body?	8b	Λ								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9		x							
Sec	organization's mailing address? If "Yes," provide the names and addresses on Schedule O tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	Э									
	(17) 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?	10a	103	Х							
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	iou									
-	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b									
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х								
b	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	12a	Х								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х								
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe										
	on Schedule O how this was done	12c	Х								
13	Did the organization have a written whistleblower policy?	13	Х								
14	Did the organization have a written document retention and destruction policy?	14	Х								
15	Did the process for determining compensation of the following persons include a review and approval by independent										
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?										
а	The organization's CEO, Executive Director, or top management official	15a	X								
b	Other officers or key employees of the organization	15b	Х								
	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?	16a	Х								
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation										
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's										
0	exempt status with respect to such arrangements?	16b		Х							
	tion 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)	avaılal	oie							
	for public inspection. Indicate how you made these available. Check all that apply.										
40	X Own website Another's website X Upon request Other (explain on Schedule O)	fire	اماد								
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	iinand	ial								
20	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										

Form 990 (2021) 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.

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

• 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.

(A) Name and title	(B) Average hours per	Position (do not check more than one box, unless person is both an						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director			irecto	Highest compensated employee	tee)	from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) RONALD GALLO	39.90									
PRESIDENT & CEO	10.10			Х				310,888.	0.	8,277.
(2) MATTHEW L. BACON	38.90									
VP & CFO	11.10			Х				186,028.	0.	12,834.
(3) TRISHA FINNEGAN	40.00									
CHIEF STRATEGY OFFICER (END 6/23/22)	10.00			Х				173,842.	0.	13,578.
(4) HEATHER CASH	39.90									
VP, DEVELOPMENT & STEWARDS	10.10			Х				128,947.	0.	13,356.
(5) ALYSSA MANNING	0.00									
PRESIDENT FELIX MARTIN FDN	40.00					Х		128,420.	0.	13,139.
(6) JANET WALTHER	40.00									
VP, COMMUNICATIONS & MARKE	10.00			Х				129,343.	0.	9,681.
(7) RAMONA DALLUM	40.00									
VP, EQUITY & IMPACT	10.00			Х				79,652.	0.	7,220.
(8) M. CLAIRE ALAGIA	1.00									
DIRECTOR (PARTIAL YEAR)	0.10	Х						0.	0.	0.
(9) GARY ULMER	1.00									
DIRECTOR (PARTIAL YEAR)	2.00	Х						0.	0.	0.
(10) ANGIE EVANS	1.00									
DIRECTOR	2.00	Х						0.	0.	0.
(11) JERRY ABRAMSON	1.00									
DIRECTOR	2.00	Х						0.	0.	0.
(12) STEPHANIE BATEMAN	1.00									
DIRECTOR	2.00	Х						0.	0.	0.
(13) GWEN KELLY	1.00									
DIRECTOR	2.00	Х						0.	0.	0.
(14) DAVID CALZI	1.00									
DIRECTOR	2.00	Х						0.	0.	0.
(15) AUDREY D. KLINE	1.00	-							_	_
DIRECTOR	2.00	Х	_			_		0.	0.	0.
(16) MARK A. CAMPISANO	1.00									
DIRECTOR (PARTIAL YEAR)	2.00	Х				_		0.	0.	0.
(17) HARRIET L. LAIR	1.00							_	_	_
DIRECTOR (PARTIAL YEAR)	2.00	Х		<u> </u>			<u> </u>	0.	0.	0. Form 990 (2021)

Form **990** (2021)

FORM 990 (2021) HOUTSVILLE,	inc.								31 033701	,	F	aye •
Part VII Section A. Officers, Directors, Trus	tees, Key Em	oloy	ees,	and	d Hig	ghes	t Co	ompensated Employee	s (continued)			
(A)	(B)				C)			(D)	(E)		(F)	
Name and title	Average	(do		Pos		າ than	ono	Reportable	Reportable	E:	stimate	ed
	hours per	box	, unle	ss pe	rson i	is botl	n an	compensation	compensation	ar	mount	of
	week	officer and a director/trustee)			tee)	from	from related		other			
	(list any hours for	recto						the	organizations	l	npensa	
	related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	l	rom th ganizat	
	organizations	Individual trustee or director	Institutional trustee		99	npen		1099-NEC)	1099-1420)	٠ ٠	ıd relat	
	below	dual t	utio ns	_	key employee	st co	-ia	1000 1120,		l	anizati	
	line)	Indivi	Instit	Officer	Key er	Highest compensated employee	Former					
(18) CURT SCOTT	1.00											
DIRECTOR	2.00	х						0.	0.			0.
(19) WILLIAM G. STRENCH	1.00											
DIRECTOR	2.00	Х						0.	0.			0.
(20) LOPA MEHROTRA	1.00											
DIRECTOR	2.00	Х						0.	0.			0.
(21) BETH S. PEABODY	1.00	1										
DIRECTOR	2.00	Х						0.	0.			0.
(22) SUSAN ZEPEDA	1.00]										
DIRECTOR	2.00	Х				_		0.	0.			0.
(23) ELIZABETH ROUNSAVALL	1.00	1										
DIRECTOR	2.00	Х				_		0.	0.			0.
(24) STEPHEN KERTIS	1.00	4						_	_			_
DIRECTOR	2.00	Х				├		0.	0.			0.
(25) THEODORE NIXON	1.00	ł										•
DIRECTOR	2.00	Х				<u> </u>		0.	0.			0.
(26) CARL L. WILLIAMS	1.00	∤							0			0
DIRECTOR	2.00	X						0.	0.			0.
1b Subtotal								1,137,120.	0.			085.
c Total from continuation sheets to Part VI								1,137,120.	0.		70	
d Total (add lines 1b and 1c)							<u> </u>	, , ,			70,	085.
2 Total number of individuals (including but n	ot limited to th	iose	liste	a ar	oove	e) wn	o re	ceived more than \$100,	000 of reportable			6
compensation from the organization											Yes	No
3 Did the organization list any former officer,	director truct	ا مم	·0\/ ·	mnl	0.40	o or	hial	host componented amp	ovec on		103	140
line 1a? If "Yes," complete Schedule J for s										3		х
										Ü		
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? If "Yes," complete Schedule J for such individual										4	Х	
5 Did any person listed on line 1a receive or a										•		
rendered to the organization? If "Yes." com										5		х
Section B. Independent Contractors	DISTO CONGCIUN	<i>J J I I</i>	J, JL	<u>. U. I. J</u>	JU13	J. I						
Complete this table for your five highest co	mpensated inc	depe	nde	nt co	ontra	acto	rs th	at received more than \$	100,000 of compensa	tion fr	om	
the organization. Report compensation for	•	•										

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							
FOURTH STREET PERFORMANCE PARTNERS									
211 GARRARD STREET, COVINGTON, KY 41011	INVESTMENT CONSULTING	190,730.							
2 Total number of independent contractors (including but not limited to those list									

\$100,000 of compensation from the organization
SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2021)

31-0997017 LOUISVILLE INC.

Form 990 LOUISVILLE, I	INC.								31-09970	17
Part VII Section A. Officers, Directors, Tru	stees, Key Er	nplo	yee	s, a	nd F	ligh	est (Compensated Employe	es (continued)	
(A) Name and title	(B) Average hours	(cl		Pos	C) ition that		lv)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	stee or director	Institutional trustee		Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) ALEJANDRO ALVAREZ	1.00									
DIRECTOR	2.00	Х						0.	0.	0.
(28) MOSES ICYISHAKA	1.00									_
DIRECTOR	2.00	Х						0.	0.	0.
(29) SUMMER AUERBACH	1.00	-						_	_	_
DIRECTOR	2.00	Х						0.	0.	0.
(30) ARMON PERRY	1.00	-						_	_	_
DIRECTOR	2.00	Х						0.	0.	0.
(31) JOSE NEIL DONIS	1.00	-						_	_	_
DIRECTOR	2.00	Х	_					0.	0.	0.
(32) DANA JACKSON	1.00	ł								
DIRECTOR (22) KDIG GIRGUIO	2.00	Х	_					0.	0.	0.
(33) KRIS SIRCHIO	1.00	.,						_	0	0
DIRECTOR	2.00	Х						0.	0.	0.
(34) ELLEN CALL DIRECTOR	2.00	X						0.	0.	0
(35) JASON ZACHARIAH	1.00	X						0.	0.	0.
DIRECTOR	2.00	X						0.	0.	0.
(36) STEPHANIE H. SMITH	2.00	Λ						0.	0.	0.
BOARD CHAIR (PARTIAL YEAR)	4.10	x		x				0.	0.	0.
(37) DAVID TACHAU	2.00							••	•	•
BOARD VICE CHAIR/CHAIR	4.10	х		x				0.	0.	0.
(38) ELIZABETH FUST	1.00							•		•
DIRECTOR/VICE CHAIR	2.00	х		x				0.	0.	0.
(39) MICHAEL W. GOUGH	2.00									
BOARD TREASURER	4.00	х		х				0.	0.	0.
(40) DEBORAH B. WILLIAMS	2.00									
BOARD SECRETARY	4.10	х		х				0.	0.	0.
		ļ	<u> </u>	_		<u> </u>				
		4								
			_			_				
		-								
]			
Total to Part VII, Section A, line 1c										

Form 990 (2021) LOUISVILLE
Part VIII Statement of Revenue

			Check if Schedule O c	onta	ains a re	sponse o	or note to any lin	e in this Part VIII			
							,	(A)	(B)	(C)	(D)
								Total revenue	Related or exempt	Unrelated	Revenue excluded
									function revenue	business revenue	from tax under sections 512 - 514
တ တ	1	<u> </u>	Federated campaigns		1	la					
ants Ints	'				Ι.	lb					
جَ ق						lc					
řts,			Fundraising events			ld	311,340.				
Contributions, Gifts, Grants and Other Similar Amounts							311,340.				
ns, Sim			Government grants (contri		· -	le					
e ë		t	All other contributions, gifts, g	-			72 267 710				
듗됨			similar amounts not included			lf	73,267,710.				
d d		-	Noncash contributions included in I		_	g \$	25,677,854.	50 550 050			
<u>0</u> <u>9</u>		h	Total. Add lines 1a-1f				<u> </u>	73,579,050.			
							Business Code				
ė	2	а	ADMIN FUND FEES				900099	700,639.	700,639.		
e Š		b									
SI		С									
eve		d									
Program Service Revenue		е									
P.		f	All other program service r	ever	nue						
			Total. Add lines 2a-2f					700,639.			
	3		Investment income (includ								
		other similar amounts)						14,176,282.		-93.	14,176,375.
	4		Income from investment of								
	5	;	Royalties		-	•					
	_		···- /			Real	(ii) Personal				
	6	а	Gross rents	6a							
	·		Less: rental expenses	6b							
			Rental income or (loss)	6c							
			Net rental income or (loss)		l						
	7		Gross amount from sales of		(i) Sec	urities	(ii) Other				
	′	а		7-	<u> </u>		(ii) Garioi				
		assets other than inventory b Less: cost or other basis		3,173.							
a)		D		7L	149,92	9 6/15					
ğ											
eve			Gain or (loss)					12 025 020			12 025 020
her Revenue			Net gain or (loss)					12,035,828.			12,035,828.
	8	а	Gross income from fundraisin	ıg ev		.					
ō			including \$								
			contributions reported on		•						
			Part IV, line 18								
			Less: direct expenses								
			Net income or (loss) from f				····· •				
	9	а	Gross income from gaming								
			Part IV, line 19								
		b	Less: direct expenses			9b					
		С	Net income or (loss) from (gami	ing activ	rities	<u></u>				
	10	а	Gross sales of inventory, le	ess r	returns						
			and allowances			10a					
		b	Less: cost of goods sold								
		С	Net income or (loss) from s	sales	of inve	ntory	>				
,							Business Code				
Miscellaneous Revenue	11	а									
ne		b	_								
ella		c									
ŠČ		d All other revenue									
Σ			Total. Add lines 11a-11d								
	12		Total revenue. See instructio					100,491,799.	700,639.	-93.	26,212,203.

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).

Do no:	Check if Schedule O contains a respons t include amounts reported on lines 6b,	(A) Total expenses	(B)	(C)	(D)
	n include amounts reported on lines 65, 9, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
	Grants and other assistance to domestic organizations				
a	nd domestic governments. See Part IV, line 21	43,542,949.	43,542,949.		
	Grants and other assistance to domestic				
	ndividuals. See Part IV, line 22				
	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	ndividuals. See Part IV, lines 15 and 16				
	Benefits paid to or for members				
	Compensation of current officers, directors,				
	rustees, and key employees	756,521.	458,863.	216,736.	80,922
	compensation not included above to disqualified				
	ersons (as defined under section 4958(f)(1)) and				
-	ersons described in section 4958(c)(3)(B)	1 222 222	221 251		
	Other salaries and wages	1,993,828.	331,064.	1,253,058.	409,706
	ension plan accruals and contributions (include	46 856		22 222	40.0-0
	ection 401(k) and 403(b) employer contributions)	46,756.	4,344.	32,039.	10,373
	Other employee benefits	195,776.	43,735.	114,323.	37,718
	Payroll taxes	194,967.	54,591.	105,282.	35,094
	ees for services (nonemployees):				
	Management	00.005	T 503	16 550	2 020
	egal	28,085.	7,583.	16,570.	3,932
	Accounting	58,705.		50,486.	8,219
	obbying				
	rofessional fundraising services. See Part IV, line 17	1 674 502		1 674 502	
	nvestment management fees	1,674,583.		1,674,583.	
_	Other. (If line 11g amount exceeds 10% of line 25,	242 202	00.446	202 011	47 025
	olumn (A), amount, list line 11g expenses on Sch O.)	342,392.	92,446.	202,011.	47,935
	Advertising and promotion	160,760.	20,000	63 560	160,760
	Office expenses	107,742.	29,090.	63,568.	15,084
	nformation technology	204,417.	55,193.	120,606.	28,618
	Royalties	151 604	40.055	90 402	21 226
	Occupancy	151,684.	40,955.	89,493.	21,236
	ravel	19,346.	5,224.	11,414.	2,708
	Payments of travel or entertainment expenses				
	or any federal, state, or local public officials	10 555	5 280	11 537	2 739
	Conferences, conventions, and meetings	19,555.	5,280.	11,537.	2,738
	nterest				
	Payments to affiliates	56,592.	15,280.	33,389.	7,923
	Depreciation, depletion, and amortization	54,479.	14,709.	32,143.	7,627
	Insurance	31,17.	±=, / 0 J .	52,145.	7,027
a Ii	bove. (List miscellaneous expenses on line 24e. If ne 24e amount exceeds 10% of line 25, column (A),				
	mount, list line 24e expenses on Schedule 0.) DEFERRED TRUST DIST.	114,917.	114,917.		
	CONTRACT LABOR	40,600.	,	40,600.	
~ .	EMBERSHIPS	36,520.		31,407.	5,113
· -	REDIT CARD FEES	28,337.		,,	28,337
~ -	All other expenses	49,963.	11,037.	15,185.	23,741
	otal functional expenses. Add lines 1 through 24e	49,879,474.	44,827,260.	4,114,430.	937,784
	oint costs. Complete this line only if the organization	, - · > , - · - •	-,, - ,	-,,	
	eported in column (B) joint costs from a combined				
	ducational campaign and fundraising solicitation.				
	adoational outpaign and fundialonly solidiation.				

Form **990** (2021)

LOUISVILLE, INC.

Form 990 (2021) Part X | Balance Sheet

Pai	<u>t X</u>	Balance Sheet						
		Check if Schedule O contains a response or	note to	any line	in this Part X			
						(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				25,409,089.	1	34,144,991.
	2	Savings and temporary cash investments					2	
	3	Pledges and grants receivable, net				230,928.	3	256,867.
	4	Accounts receivable, net				1,698,226.	4	1,143,357.
	5	Loans and other receivables from any curren						
		trustee, key employee, creator or founder, su	ubstantia	l contri	butor, or 35%			
		controlled entity or family member of any of t	these pe	rsons			5	
	6	Loans and other receivables from other disqu	ualified p	ersons				
		under section 4958(f)(1)), and persons descri	ibed in s	ection 4	4958(c)(3)(B)		6	
Ŋ	7	Notes and loans receivable, net				9,328,039.	7	7,189,160.
Assets	8	Inventories for sale or use					8	
As	9	Duran did a sur an analysis defends of all and a				61,246.	9	63,737.
	10a	Land, buildings, and equipment: cost or other	er					
		basis. Complete Part VI of Schedule D	10	а	1,054,809.			
	b	Less: accumulated depreciation	10	b	936,909.	96,529.	10c	117,900.
	11	Investments - publicly traded securities				457,128,998.	11	401,836,693.
	12	Investments - other securities. See Part IV, lin				180,985,796.	12	184,022,118.
	13	Investments - program-related. See Part IV, li	ine 11				13	
	14	Intangible assets					14	
	15	Other assets. See Part IV, line 11				547,865.	15	324,323.
	16	Total assets. Add lines 1 through 15 (must e			1	675,486,716.	16	629,099,146.
	17	Accounts payable and accrued expenses				1,117,674.	17	808,312.
	18	Grants payable				518,917.	18	1,492,540.
	19	Deferred revenue				10,000.	19	45,463.
	20	Tax-exempt bond liabilities					20	
	21	Escrow or custodial account liability. Comple	ete Part I	V of Sc	chedule D		21	
S	22	Loans and other payables to any current or f	ormer of	ficer, d	irector,			
Liabilities		trustee, key employee, creator or founder, su	ubstantia	l contri	butor, or 35%			
iabi		controlled entity or family member of any of t	these pe	rsons			22	
_	23	Secured mortgages and notes payable to un	related t	hird pa	rties		23	
	24	Unsecured notes and loans payable to unrela		-			24	
	25	Other liabilities (including federal income tax,						
		parties, and other liabilities not included on li	ines 17-2	24). Cor	nplete Part X			
		of Schedule D				24,000,684.	25	23,137,520.
	26					25,647,275.	26	25,483,835.
(0		Organizations that follow FASB ASC 958,	check h	ere 🕨	· [X]			
ce		and complete lines 27, 28, 32, and 33.						
alan	27	Net assets without donor restrictions				312,156,923.	27	265,932,793.
Ř	28	Net assets with donor restrictions				337,682,518.	28	337,682,518.
ū		Organizations that do not follow FASB AS	C 958, c	heck h	ere 🕨 🔲			
ΥF		and complete lines 29 through 33.						
ts c	29	Capital stock or trust principal, or current fur					29	
sse	30	Paid-in or capital surplus, or land, building, o					30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated				C40 020 444	31	CO2 C15 211
§.	32	Total net assets or fund balances				649,839,441.	32	603,615,311.
	33	Total liabilities and net assets/fund balances				675,486,716.	33	629,099,146.

31-0997017

	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	100	,491,	799.
2	Total expenses (must equal Part IX, column (A), line 25)	2	49	,879,	474.
3	Revenue less expenses. Subtract line 2 from line 1	3	50	,612,	325.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	649	,839,	441.
5	Net unrealized gains (losses) on investments	5	-96	,836,	455.
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	603	,615,	311.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		Х
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	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:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	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:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2021)

132012 12-09-21

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

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.

THE COMMUNITY FOUNDATION OF

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

LOUISVILLE 31-0997017 TNC Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 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). 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: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 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). X 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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. 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. 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. 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. 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. 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. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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.)

Sec	ction A. Public Support						
Cale	ndar 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.")	33,111,213.	49,678,379.	101,583,771.	38,888,654.	73,579,050.	296,841,067.
2	Tax revenues levied for the organ-						
	ization'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	33,111,213.	49,678,379.	101,583,771.	38,888,654.	73,579,050.	296,841,067.
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)						74,959,671.
6	Public support. Subtract line 5 from line 4.						221,881,396.
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4	33,111,213.	49,678,379.	101,583,771.	38,888,654.	73,579,050.	296,841,067.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	10,024,635.	11,763,202.	12,480,544.	11,241,859.	14,176,282.	59,686,522.
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.)		2,383.	49,124.	150.		51,657.
11	Total support. Add lines 7 through 10						356,579,246.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	5,014,306.
13	First 5 years. If the Form 990 is for the	ıe organization's fir	rst, second, third, t	fourth, or fifth tax y	ear as a section 5	01(c)(3)	
	organization, check this box and stop						_
Sec	tion C. Computation of Publi					г	
14	Public support percentage for 2021 (I					14	62.22 %
15	Public support percentage from 2020					15	60.02 %
16a	33 1/3% support test - 2021. If the o						
	stop here. The organization qualifies						
b	33 1/3% support test - 2020. If the o						
	and stop here. The organization qual	•	• •				
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact		•	-	•	VI how the organiz	ation
	meets the facts-and-circumstances te	· ·					
b	10% -facts-and-circumstances test	ū				•	10% or
	more, and if the organization meets the		•		•		. —
	organization meets the facts-and-circu						>
18	Private foundation. If the organization	n did not check a l	box on line 13, 16	a, 16b, 17a, or 17b	, check this box a	nd see instructions	<u> </u>

Schedule A (Form 990) 2021

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.)

Secti	on A. Public Support	now, picase comp	note i art ii.j				
	ar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 G	ifts, grants, contributions, and lembership fees received. (Do not clude any "unusual grants.")						,,
2 G m fo ar	ross receipts from admissions, lerchandise sold or services per- ormed, or facilities furnished in a pactivity that is related to the reganization's tax-exempt purpose						
ar	ross receipts from activities that re not an unrelated trade or bus- ess under section 513						
iz	ax revenues levied for the organ- ation's benefit and either paid to r expended on its behalf						
fu	ne value of services or facilities irnished by a governmental unit to be organization without charge						
6 T	otal. Add lines 1 through 5					1	
	mounts included on lines 1, 2, and received from disqualified persons						
fro ex	nounts included on lines 2 and 3 received on other than disqualified persons that ceed the greater of \$5,000 or 1% of the nount on line 13 for the year						
c A	dd lines 7a and 7b						
8 P	ublic support. (Subtract line 7c from line 6.) on B. Total Support						
	ar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	mounts from line 6	(4) 2011	(6) 2010	(6) 2013	(4) 2020	(6) 2021	(i) Total
10a G di se	ross income from interest, ividends, payments received on ecurities loans, rents, royalties, and income from similar sources						
	nrelated business taxable income						
,	ess section 511 taxes) from businesses equired after June 30, 1975						
c A	dd lines 10a and 10b						
11 N ac w	et income from unrelated business ctivities not included on line 10b, hether or not the business is egularly carried on						
12 O	ther income. Do not include gain r loss from the sale of capital ssets (Explain in Part VI.)						
	otal support. (Add lines 9, 10c, 11, and 12.)						
14 Fi	irst 5 years. If the Form 990 is for the	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) organization	on,
cl	neck this box and stop here	<u></u>					_
Secti	on C. Computation of Public	Support Per	centage				
15 P	ublic support percentage for 2021 (lir	ne 8, column (f), c	livided by line 13,	column (f))		15	%
	ublic support percentage from 2020					16	%
Secti	on D. Computation of Invest	tment Income	e Percentage				
17 In	vestment income percentage for 202	21 (line 10c, colur	mn (f), divided by I	ine 13, column (f))		17	%
18 In	vestment income percentage from 2	.020 Schedule A,	Part III, line 17			18	%
19a 33	3 1/3% support tests - 2021. If the	organization did r	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line 1	7 is not
m	ore than 33 1/3%, check this box and	d stop here. The	organization qual	fies as a publicly s	supported organiza	ation	>
	3 1/3% support tests - 2020. If the	· ·			•	•	
	ne 18 is not more than 33 1/3%, chec rivate foundation. If the organization						

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Schedule A (Form 990) 2021

Page 4

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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes." answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? |f "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- 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)? 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? 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).
- 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?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes." provide detail in Part VI.
- 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? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes." complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- 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? If "Yes," provide detail in Part VI.
- 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? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to determine whether the organization had excess business holdings.)

Yes No 1 2 За 3b Зс 4a 4b 4c 5a 5b <u>5c</u> 6 7 8 9a 9b 9с 10a 10b

THE COMMUNITY FOUNDATION OF LOUISVILLE, INC. 31-0997017 Schedule A (Form 990) 2021 Page 5 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? 11a **b** A family member of a person described on line 11a above? 11b c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide <u>detail in Par</u>t VI 11c Section B. Type I Supporting Organizations Yes No 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? 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 1 supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 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? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, upervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations Yes No 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)? 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) Section D. All Type III Supporting Organizations No Yes 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? 1 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? If "No," explain in Part VI how 2 the organization maintained a close and continuous working relationship with the supported organization(s). 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? If "Yes," describe in Part VI the role the organization's 3 <u>supported organizations played in this regard.</u> 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). The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. b The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions) С Yes No 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? 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. 2a 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? If "Yes." explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in

Parent of Supported Organizations. Answer lines 3a and 3b below.

these activities but for the organization's involvement.

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? If "Yes" or "No" provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Schedule A (Form 990) 2021

2b

За

10430509 758005 1000009866.TAX3

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on N	lov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus		•	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
	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			
0				
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	7		
7	Other expenses (see instructions)			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		(D) 0
Sect	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 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		
	ion 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	Check here if the current year is the organization's first as a non-functional		d Type III supporting orga	nization (see
•	inetructions	any integrate	a Type iii supporting orga	ii ii Zatioi i (See

Schedule A (Form 990) 2021

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations (continued)	
<u>Secti</u>	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes	1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity		2	
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations	3	
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide 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	ne 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	
Secti	on 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 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2021			
a	From 2016			
<u>b</u>	From 2017			
c	From 2018			
<u>d</u>	From 2019			
е	From 2020			
f	Total of lines 3a through 3e			
<u>g</u>	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2021 distributable amount			
<u> i </u>	Carryover from 2016 not applied (see instructions)			
<u>i_</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2021 from Section D,			
	line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2021 distributable amount			
	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:			
	Excess from 2017			
	Excess from 2018			
	Excess from 2019			
	Excess from 2020			
е	Excess from 2021			

Schedule A (Form 990) 2021

Part VI	Supplemental Information Decide the metallic and a few parts and a part to the part to the parts and a part to the parts and a part to the
T dit VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V,
	Section D, lines 2 and 3, Part IV, Section E, lines 10, 2a, 2b, 3a, and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section B, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
	Accountable to the second seco

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

THE COMMUNITY FOUNDATION OF

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

Employer identification number

LOT	LOUISVILLE, INC. 31-0997017	
Organization type (check o	ne):	
Filers of:	Section:	
Form 990 or 990-EZ	X 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	
	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e. See instructions.
General Rule		
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's	
Special Rules		
sections 509(a)(1) a contributor, during	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support that 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Figure 1. Complete Parts I and II.	that received from any one
contributor, during literary, or education	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a the year, total contributions of more than \$1,000 exclusively for religious, charitable, scional purposes, or for the prevention of cruelty to children or animals. Complete Parts I (els) instead of the contributor name and address), II, and III.	entific,
year, contributions is checked, enter h purpose. Don't cor	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a exclusively for religious, charitable, etc., purposes, but no such contributions totaled materies the total contributions that were received during the year for an exclusively religious amplete any of the parts unless the General Rule applies to this organization because it re, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000. If this box s, charitable, etc., eceived <i>nonexclusively</i>
answer "No" on Part IV, line	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (For 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, g requirements of Schedule B (Form 990).	
_НА For Paperwork Reducti	on Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.	Schedule B (Form 990) (2021)

Schedule B (Form 990) (2021) Page 2

Name of organization
THE COMMUNITY FOUNDATION OF
LOUISVILLE, INC.

Employer identification number
31-0997017

Part I	Contributors (see instructions). Use duplicate copies of Part I if addit	onal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contr	ibution
1		Person [Payroll [Noncash [(Complete Part II noncash contributions)	
(a)	(b)	(c) (d)	
No.	Name, address, and ZIP + 4	Total contributions Type of contri	ibution
2		Person [Payroll [Noncash [(Complete Part II noncash contributions)	
(a)	(b)	(c) (d)	
No.	Name, address, and ZIP + 4	Total contributions Type of contri	ibution
3		Person [Payroll [Noncash [(Complete Part II noncash contributions)	
(a)	(b)	(c) (d)	
No.	Name, address, and ZIP + 4	Total contributions Type of contri	ibution
4		Person [Payroll [Noncash [(Complete Part II noncash contribut	
(a)	(b)	(c) (d)	
No.	Name, address, and ZIP + 4	Total contributions Type of contr	ibution
5		Payroll	
(a)	(b)	(c) (d)	
No.	Name, address, and ZIP + 4	Total contributions Type of contributions Person Payroll Noncash (Complete Part II noncash contributions)	X I for

Schedule B (Form 990) (2021) Page **2**

Name of organization
THE COMMUNITY FOUNDATION OF
LOUISVILLE, INC.

Employer identification number
31-0997017

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	Name, address, and ZiF + 4	\$\$ 4,963,864.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
9 9	Name, address, and ZIP + 4	* 3,000,000.	Person X Payroll
(a)	(b)	(c)	(d)
10	Name, address, and ZIP + 4	* 3,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	Numb, audi 033, and EIF T T	\$\$, 1,506,725.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4	\$	Person Payroll Complete Part II for noncash contributions.

Name of organization
THE COMMUNITY FOUNDATION OF
LOUISVILLE, INC.

Employer identification number

31-0997017

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	rt 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
	STOCK		
2			
		\$\$	12/10/21
(a) No. from	(b)	(c) FMV (or estimate)	(d)
Part I	Description of noncash property given	(See instructions.)	Date received
	STOCK		
5			
		\$	06/30/22
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	STOCK		
8			
		\$ 4,963,864.	01/26/22
(a)			
No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions.)	Date received
Parti	STOCK		
11			
		\$1,506,725.	12/27/21
(a)			
No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions.)	Date received
		\$	

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

Inspection

Employer identification number

THE COMMUNITY FOUNDATION OF Name of the organization

LOUISVILLE, INC.

31 - 0997017Organizations Maintaining Donor Advised Funds or Other Similar Funds or A

Pa	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line 6		iliai Fullus of A	Accounts. Complete if the
		(a) Donor advised	funds	(b) Funds and other accounts
1	Total number at end of year		375	
2	Aggregate value of contributions to (during year)	5	3,989,633.	
3	Aggregate value of grants from (during year)	3	3,113,465.	
4	Aggregate value at end of year	31	2,610,404.	
5	Did the organization inform all donors and donor advisors in wri	iting that the assets held	in donor advised fu	unds
	are the organization's property, subject to the organization's ex	clusive legal control?		X Yes No
6	Did the organization inform all grantees, donors, and donor adv			
	for charitable purposes and not for the benefit of the donor or d	donor advisor, or for any	other purpose confe	erring
	impermissible private benefit?	· · · · · · · · · · · · · · · · · · ·		
Pa	rt II Conservation Easements. Complete if the organ	nization 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		Preservation of a hi	storically important land area
	Protection of natural habitat		Preservation of a ce	ertified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified	d conservation contributi	on in the form of a	conservation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			
С	Number of conservation easements on a certified historic struct			
d	Number of conservation easements included in (c) acquired after			
	listed in the National Register			2d
3	Number of conservation easements modified, transferred, relea			
	year >	, ,	, ,	C
4	Number of states where property subject to conservation easer	ment is located		
5	Does the organization have a written policy regarding the period	dic monitoring, inspectio	n, handling of	
	violations, and enforcement of the conservation easements it he	olds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, ha			
	>			
7	Amount of expenses incurred in monitoring, inspecting, handlin	ng of violations, and enfo	cing conservation	easements during the year
	> \$			
8	Does each conservation easement reported on line 2(d) above s	satisfy the requirements	of section 170(h)(4)	(B)(i)
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation			
	balance sheet, and include, if applicable, the text of the footnot	te to the organization's fi	nancial statements	that describes the
	organization's accounting for conservation easements.			
Pa	rt III Organizations Maintaining Collections of A	Art, Historical Treas	sures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form 99	90, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958,	not to report in its reven	ue statement and b	alance sheet works
	of art, historical treasures, or other similar assets held for public	c exhibition, education, o	r research in furthe	rance of public
	service, provide in Part XIII the text of the footnote to its financi	ial statements that descr	bes these items.	
b	If the organization elected, as permitted under FASB ASC 958,	to report in its revenue s	tatement and balar	nce sheet works of
	art, historical treasures, or other similar assets held for public ex	xhibition, education, or re	esearch in furtherar	nce of public service,
	provide the following amounts relating to these items:	•		
	(i) Revenue included on Form 990, Part VIII, line 1			• \$
2	If the organization received or held works of art, historical treasu			
	the following amounts required to be reported under FASB ASC		_	•
а	Revenue included on Form 990, Part VIII, line 1			> \$
	Assets included in Form 990, Part X			
	For Paperwork Reduction Act Notice, see the Instructions for			Schedule D (Form 990) 2021

132051 10-28-21

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

e organization's acquisition, accession	and other records	shool on of the f	حجم فحجاف محانيين الح	Landa de la constitución		_		
	i, and other records	s, check any of the i	ollowing that ma	ke signi	ificant use of i	ts		
n items (check all that apply):								
blic exhibition	d	Loan or excl	hange program					
holarly research	е	Other						
eservation for future generations								
a description of the organization's coll	ections and explain	how they further th	e organization's	exempt	purpose in P	art XIII.		
· ·								_
						Yes		No
		te if the organization	n answered "Yes	" on Fo	orm 990, Part	V, line 9, o	r	
-		•				—		٦
						Yes		No
explain the arrangement in Part XIII are	nd complete the foll	owing table:				Amoun	^+	
n halan sa					4.	Amou	IL	
						Vac		No
-				•				
Complete ii			, , , , , , , , , , , , , , , , , , , ,		Three vears ba	ck (e) Fou	ır vears	back
g of year balance				-				
				-				
				-		_		
				-		_		
					· · ·			
	6,754,474.	5,617,750.	5,306,15	50.	4,496,63	6. 3	,866,	052.
	613,751,364.	663,755,476.	499,394,41	L7.	431,814,07	4. 392	,532,	054.
	nt year end balance	(line 1g, column (a)) held as:					
esignated or quasi-endowment	49.0950	_%						
nt endowment ►0750	%							
dowment >50.8310 %	ó							
entages on lines 2a, 2b, and 2c shoul	d equal 100%.							
endowment funds not in the possess	sion of the organiza	tion that are held an	d administered f	or the o	organization			
							Yes	No
lated organizations						3a(i)		Х
ed organizations						3a(ii)		Х
						3b		
		vment funds.						
, , , , , , , , , , , , , , , , , , , ,			D					
<u> </u>	1	· · · · · · · · · · · · · · · · · · ·						
Description of property	1 ''	, , ,		. ,		(d) Boo	ok valu	e
	I				257,894.			665.
nt	.				484,827.			544.
								691.
s 1a through 1e. (Column (d) must ea	ual Form 990. Part)	K. column (B), line 10	Oc.)				117,	900.
	recolarly research reservation for future generations and description of the organization solicit or description and custodial Arrang ported an amount on Form 990, Part Janization an agent, trustee, custodial 990, Part X? Explain the arrangement in Part XIII and generation include an amount on Form sexplain the arrangement in Part XIII. Condowment Funds. Complete if the organization include an amount on Form sexplain the arrangement in Part XIII. Condowment Funds. Complete if the estimated percentage of the current signated or quasi-endowment part and low ment part or sold the condowment part or sold the current endowment funds not in the possessificated organizations and line 3a(ii), are the related organization endowned buildings, and Equipment part XIII the intended uses of the current endowned funds and Equipment part XIII the intended uses of the current endowned buildings, and Equipment part XIII the intended uses of the current endowned funds and Equipment part XIII the intended uses of the current endowned endowned endowned Equipment endowned	rolarly research reservation for future generations collections and explain reservation and generation solicit or receive donations of reservation and to raise funds rather than to be maintained as part of the reservation and generation or other intermedical section of property Continue	nolarly research servation for future generations idescription of the organization's collections and explain how they further the e year, did the organization solicit or receive donations of art, historical treas idescription of the organization's collections and explain how they further the e year, did the organization's collections and explain how they further the e year, did the organization's collections and explain how they further the e year, did the organization's collections and the organization's collections for an advance of the organization or other intermediary for contributions good, part X? explain the arrangement in Part XIII and complete the following table: g balance g balance g balance explain the arrangement in Part XIII and complete the following table: g balance granization include an amount on Form 990, Part X, line 21, for escrow or cue explain the arrangement in Part XIII. Check here if the explanation has been indowment Funds. Complete if the organization answered "Yes" on Fo (a) Current year (b) Prior year g of year balance (b) Prior year g of year balance (a) Current year (b) Prior year (b) Prior year g of year balance (a) Current year (b) Prior year (b) Prior year (c) For year (a) Current year (b) Prior year (b) Prior year (c) For year (c) For year (d) For year (e) For year (e) For year (f) Advances (f) For year (g) For year (h) Prior year (h) Prior year (h) Prior year (a) Gyariation answered "Yes" on Form 990, Part IV, line 11a, S (b) Prior year (c) For year (d) For year (e) For yea	to larly research to Deter	diary research servation for future generations description of the organization's collections and explain how they further the organization's exempt e year, did the organization solicit or receive donations of art, historical treasures, or other similar as the raise funds rather than to be maintained as part of the organization's collection? Scrow and Custodial Arrangements. Complete if the organization answered "Yes" on Forestor and amount on Form 990, Part X, line 21. anization an agent, trustee, custodian or other intermediary for contributions or other assets not ince 990, Part X? Suplain the arrangement in Part XIII and complete the following table: g balance didring the year ons during the year alance didring the year ons during the year alance (a) Current year (b) Prior year (c) Two years back (d) (a) Current year (b) Prior year (c) Two years back (d) (a) Current year (b) Prior year (c) Two years back (d) (a) Current year (b) Prior year (c) Two years back (d) (b) Prior year (c) Two years back (d) (c) Application of the organization answered "Yes" on Form 990, Part IV, line 10. g of year balance (a) Current year (b) Prior year (c) Two years back (d) (a) Current year (b) Prior year (c) Two years back (d) (b) Prior year (c) Two years back (d) (c) Application (d) Prior year (d) Two years back (d) (d) Application (d) Prior year (e) Two years back (d) (e) Organization (d) Prior year (e) Two years back (d) (e) Organization (d) Prior year (e) Prior year (e) Two years back (d) (e) Organization (d) Prior year (e) Two years back (d) (e) Organization (d) Prior year (e) Two years back (d) (e) Organization (d) Prior year (e) Two years back (d) (e) Organization (d) Prior year (e) Two years back (d) (e) Organization (d) Prior year (e) Two years back (d) (e) Organization (d) Prior year (e) Two years back (d) (e) Organization (e) Organization (d) Prior year (e) Two years back (d) (e) Organization (e	nolarly research servation for future generations description of the organization's collections and explain how they further the organization's exempt purpose in P e year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to raise funds rather than to be maintained as part of the organization's collection? Scrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part X, line 21. anization an agent, trustee, custodian or other intermediary for contributions or other assets not included 990, Part X? explain the arrangement in Part XIII and complete the following table: galance during the year let let lalance during the year let let lalance did long lance long long lance did long lance did long lance long long lance long long lance did long lance did long lance long	reclarly research servation for future generations description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. e year, did the organization solicit or receive donations of art, historical treasures, or other similar assets of to raise funds rather than to be maintained as part of the organization's collection? Yes Scrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, o ported an amount on Form 990, Part X, line 21, anization an agent, trustee, custodian or other intermediary for contributions or other assets not included geo, Part X? yes palance during the year aliance during the year aliance during the year aliance go fyear balance go fyear balance and a second for the organization answered "Yes" on Form 990, Part XIII andowment Funds. Complete if the organization answered "Yes" on Form 990, Part XIII andowment Funds. Complete if the organization answered "Yes" on Form 990, Part XIII andowment Funds. Complete if the organization answered "Yes" on Form 990, Part XIII andowment Funds. Complete if the organization answered "Yes" on Form 990, Part XIII andowment Funds. Complete if the organization answered "Yes" on Form 990, Part XIII andowment Funds. Complete if the organization answered "Yes" on Form 990, Part XIII andowment Funds. Complete if the organization answered "Yes" on Form 990, Part XIII andowment Funds. Complete if the organization answered "Yes" on Form 990, Part XIII andowment Funds. Complete if the organization was been provided on Part XIII andowment Funds. Complete if the organization was been provided on Part XIII andowment Funds. Complete if the organization was been provided on Part XIII andowment Funds. Complete if the organization was been provided on Part XIII andowment Funds. Complete if the organization was been provided on Part XIII andownent Funds. Complete if the organization was been provided on Part XIII andownent Funds. Complete if the organization was been provided	nolarly research e Other servation for future generations description for future generations description for future generations of description for the organization's collections and explain how they further the organization's exempt purpose in Part XIII. e year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to the raise funds at amount on Form 990, Part IX, line 21. Scrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IX, line 9, or ported an amount on Form 990, Part X, line 21. Scrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IX, line 9, or ported an amount on Form 990, Part XIII and complete the following table: Ves

Schedule D (Form 990) 2021

31-0997017

Part VII	Investr	nents - Other Securities.	

Complete if the organization	answered "Yes" on Form	n 990. Part IV. line 11b	o. 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	487,200.	COST
(3) Other		
(A) LIMITED LIABILITY COMPANY	157,600,864.	COST
(B) LIMITED PARTNERSHIPS	13,989,352.	COST
(C) NOTES RECEIVABLE	8,919,160.	COST
(D) UNITRUSTS	2,524,948.	COST
(E) ANNUITY TRUST	500,594.	COST
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	184,022,118.	

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)	GIFT ANNUITY LIABILITY	1,130,303.
(3)	AGENCY FUNDS	22,007,217.
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	23,137,520.

^{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 ... X

Schedule D (Form 990) 2021

Par	Reconciliation of Revenue per Audited Financial States Complete if the organization answered "Yes" on Form 990, Part IV, I		ue per Return.	
1		124.	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			
c	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)			
	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1			
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.)			
	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12			
Par	t XII Reconciliation of Expenses per Audited Financial St	atements With Exper	ises per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, I	ine 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:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d			
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.)	4b		
	Add lines 4a and 4b			
5 Dar	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line t XIII Supplemental Information.	18.)	5	
		A. David IV. Page 4 la good Ob.	Doubly East At Bookly East Or Bookly	
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and		Part V, line 4; Part X, line 2; Part XI,	
imes	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a	any additional information.		
PART	V, LINE 4:			
THE	ORGANIZATION'S ENDOWMENT FUNDS ARE USED TO FURTHER ITS E	XEMPT PURPOSE		
OF D	ISTRIBUTING CONTRIBUTIONS AND GRANTS FOR CHARITABLE PURP	OSES.		
PART	X, LINE 2:			
THE	FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SEC	TION 501(C)(3)		
OF T	HE INTERNAL REVENUE CODE (CODE). ADDITIONALLY, THE FOUN	DATION HAS		
BEEN	DETERMINED BY THE INTERNAL REVENUE SERVICE NOT TO BE A	PRIVATE		
FOUN	DATION WITHIN THE CONTEXT OF SECTION 509(A) OF THE CODE.			
	ADDITIONALE MUE EQUINAMION PROCESSING VINCEPERS VINCEPER	MAY DOGTMIONS		
WHEN	APPLICABLE, THE FOUNDATION RECOGNIZES UNCERTAIN INCOME	TAX POSITIONS		
USIN	G THE "MORE-LIKELY-THAN-NOT" APPROACH AS DEFINED IN THE	ASC. NO		

THE COMMUNITY FOUNDATION OF

Schedule D (Form 990) 2021 LOUISVILLE, INC.	31-0997017	Page 5
Schedule D (Form 990) 2021 LOUISVILLE, INC. Part XIII Supplemental Information (continued)		
ITADIIIMV BOD IMGEDMAIN MAY DOGIMIONG HAG DEEN DEGODDED IN MUR		
LIABILITY FOR UNCERTAIN TAX POSITIONS HAS BEEN RECORDED IN THE		
ACCOMPANYING CONSOLIDATED FINANCIAL STATEMENTS.		

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Inspection

Employer identification number

THE COMMUNITY FOUNDATION OF LOUISVILLE INC. 31-0997017 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (b) Number of (e) If activity listed in (d) (c) Number of (d) Activities conducted in the region (f) Total (a) Region employees, agents, and expenditures offices (by type) (such as, fundraising, prois a program service, for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region CENTRAL AMERICA AND THE CARIBBEAN INVESTMENTS 6,767,477. 0 0 6,767,477. 3 a Subtotal **b** Total from continuation 0 sheets to Part I Totals (add lines 3a 6,767,477. and 3b)

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

Schedule F (Form 990) 2021

Schedule F (Form 990) 2021

LOUISVILLE, INC. 31-0997017

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			recognized as charities by the t					I
	exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities							

Page 2

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (e) Manner of cash disbursement (c) Number of (d) Amount of (f) Amount of (g) Description of (a) Type of grant or assistance (b) Region recipients cash grant noncash noncash assistance assistance

LOUISVILLE, INC. Schedule F (Form 990) 2021 Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	X Yes	☐ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2021

Part V	Supplemental Information
	Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of
	investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c)
	(estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

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.

2021
Open to Public Inspection

Name of the organization THE COMMUNITY		?					Employer identification number
LOUISVILLE, II							31-0997017
Part I General Information on Grants a				amantana) alimihilita	. fa., tha amanta an aasi		<u> </u>
 Does the organization maintain records to criteria used to award the grants or assist Describe in Part IV the organization's pro 	stance?						
Part II Grants and Other Assistance to recipient that received more than S	Domestic Organia	zations and Domesti	c Governments.	Complete if the org	anization answered "	es" on Form 990, Part	t IV, line 21, for any
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
SCHWAB CHARITABLE FUND 211 MAIN ST SAN FRANCISCO, CA 94105	31-1640316	509(A)(1)	3,622,023.	0.			T99 OTHER PHILANTHROPY VOLUNTARISM AND GRANTMAKING FOUNDATIONS N.E.C.*
LOUISVILLE COLLEGIATE SCHOOL 2427 GLENMARY AVENUE LOUISVILLE, KY 40204	61-0449630	509(A)(1)	2,044,136.	0.			B20 ELEMENTARY SECONDARY ED
UNIVERSITY OF LOUISVILLE FOUNDATION, INC PO BOX 772050 - CHICAGO, IL 60677	23-7078461	509(A)(1)	1,371,976.	0.			B11 SINGLE ORGANIZATION SUPPORT
EVOLVE502, INC. 334 E BROADWAY LOUISVILLE, KY 40202-0488	83-1877240	509(A)(1)	1,100,000.	0.			B99 EDUCATION N.E.C.*
BANK OF AMERICA CHARITABLE GIFT FUND - 100 FEDERAL STREET, MA1-225-04-02 - BOSTON, MA 02110	04-6010342	509(A)(1)	970,263.	0.			T70 FUNDRAISING ORGANIZATIONS THAT CROSS CATEGORIES (INCLUDES COMMUNITY FUNDS)
FRIENDS OF MCGILL UNIVERSITY INC. PO BOX 28137 NEW YORK, NY 10087-8137	23-7054819	509(A)(1)	785,000.	0.			B EDUCATIONAL INSTITUTIONS
2 Enter total number of section 501(c)(3) a	nd government org	ganizations listed in th	ne line 1 table			•	> 546.
3 Enter total number of other organizations	s listed in the line	1 table					▶ 9.

Schedule I (Form 990) LOUISVILLE, IN	1C.						31-0997017 Page 1
Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt 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
METRO UNITED WAY, INC. 334 E BROADWAY, PO BOX 4488 LOUISVILLE, KY 40204-0488	61-0444680	509(A)(1)	733,290.	0.			P30 CHILDREN'S AND YOUTH
LOUISVILLE ORCHESTRA INC. 624 W MAIN STREET STE 400 LOUISVILLE, KY 40202	61-6000384	509(A)(2)	723,346.	0.			A69 SYMPHONY ORCHESTRAS
AMERICAN RED CROSS - LOUISVILLE AREA CHAPTER - 510 EAST CHESTNUT STREET - LOUISVILLE, KY 40202	53-0196605	509(A)(1)	710,589.	0.			M20 DISASTER PREPAREDNESS AND RELIEF SERVICE
FUND FOR THE ARTS, INC. 623 WEST MAIN STREET LOUISVILLE, KY 40202	61-0479626	509(A)(1)	699,706.	0.			A12 FUNDRAISING AND/OR FUND DISTRIBUTION
BERRY CENTER INC. 111 S. MAIN STREET, PO BOX 582 NEW CASTLE, KY 40050	80-0721644	509(A)(1)	675,379.	0.			B70 LIBRARIES LIBRARY SCIENCE
SPEED ART MUSEUM 2035 SOUTH THIRD STREET LOUISVILLE, KY 40208	61-0444823	509(A)(1)	591,229.	0.			A51 ART MUSEUMS
COMMUNITY FOUNDATION OF LOUISVILLE CORPORATE DEPOSITORY - 325 W. MAIN STREET, SUITE 1110 - LOUISVILLE, KY 40202	61-1100993	509(A)(1)	467,223.	0.			T31 COMMUNITY FOUNDATIONS
ROLLINS COLLEGE PO BOX 850001, DEPT# 9921 ORLANDO, FL 32885	59-0624440	509(A)(1)	425,000.	0.			B40 HIGHER ED INSTITUTIONS
CHARITIES AID FOUNDATION AMERICA 225 REINEKERS LANE SUITE 375 ALEXANDRIA, VA 22314	43-1634280	509(A)(1)	420,000.	0.			Q12 FUNDRAISING AND/OR FUND DISTRIBUTION

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LOUISVILLE, INC. 31-0997017 Schedule I (Form 990)

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	overnments (Scho	edule I (Form 990), Pa	ırt II.)	1 ago 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 non-cash assistance	(h) Purpose of grant or assistance
THE NATURE CONSERVANCY - KENTUCKY							C99 ENVIRONMENTAL QUALITY
CHAPTER - 114 WOODLAND AVE -							PROTECTION AND
LEXINGTON, KY 40502	53-0242652	509(A)(1)	416,540.	0.			BEAUTIFICATION N.E.C.*
NORTON HEALTHCARE FOUNDATION INC.							
DEPT 86140, PO BOX 950183							E11 SINGLE ORGANIZATION
LOUISVILLE, KY 40295	31-0914919	509(A)(1)	415,000.	0.			SUPPORT
BELLARMINE UNIVERSITY							
2001 NEWBURG ROAD							B43 UNIVERSITY OR
LOUISVILLE, KY 40205-0671	61-0482955	509(A)(1)	393,285.	0.			TECHNOLOGICAL
·			,				
LHOME							
PO BOX 211028							
LOUISVILLE, KY 40221	45-4127209	509(A)(2)	360,500.	0.			L21 PUBLIC HOUSING
KENTUCKY STATE TREASURER							
KENTUCKY FINANCE AND							
ADMINISTRATION CABINET, 200 MERO							M20 DISASTER PREPAREDNESS
STREET, 5TH FLOOR - FR	61-0600439	170(C)(1)	354,700.	0.			AND RELIEF SERVICE
LOUISVILLE URBAN LEAGUE							
1535 WEST BROADWAY							
LOUISVILLE, KY 40203	61-0444771	509(A)(1)	338,236.	0.			P22 URBAN LEAGUE
		, (-,	,				
SAYRE SCHOOL							
194 N. LIMESTONE							B EDUCATIONAL
LEXINGTON, KY 40507	61-0449657	509(A)(1)	300,000.	0.			INSTITUTIONS
UNIVERSITY OF LOUISVILLE							
STUDENT FINANCIAL AID OFFICE,							
HOUCHENS BLDG ROOM 110 -							B EDUCATIONAL
LOUISVILLE, KY 40292	61-1014882	170(C)(1)	296,606.	0.			INSTITUTIONS
COMMUNITY FOUNDATION OF LOUISVILLE							T PHILANTHROPY
DEPOSITORY - 325 W. MAIN SUITE	21 1140000	E00/3\/1\	201 224	_			VOLUNTARISM AND
1110 - LOUISVILLE, KY 40202	31-1140889	DU9(A)(I)	291,234.	0.			GRANTMAKING

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509(A)(1)	286,800.			
509(A)(1)	286,800.	0		
509(A)(1)	286,800.	0		B82 SCHOLARSHIPS STUDENT
		0.		FINANCIAL AID AWARDS
509(A)(1)	267,769.	0.		B25 SECONDARY/HIGH SCHOOL
				B11 SINGLE ORGANIZATION
509(A)(1)	258,962.	0.		SUPPORT
509(A)(1)	256,236.	0.		N32 PARKS AND PLAYGROUNDS
509(A)(1)	230,000.	0.		T31 COMMUNITY FOUNDATIONS
509(A)(1)	230,000.	0.		131 COMMONITY FOUNDATIONS
				E11 SINGLE ORGANIZATION
509(A)(1)	208,319.	0.		SUPPORT
				C41 BOTANICAL GARDENS
				ARBORETA AND BOTANICAL
509(A)(1)	206,400.	0.		ORGANIZATIONS
509(A)(1)	203,192.	0.		N32 PARKS AND PLAYGROUNDS
1	202 988	n		N32 PARKS AND PLAYGROUNDS
	509(A)(1) 509(A)(1)			

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Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt 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 PUBLIC RADIO, INC. DBA LOUISVILLE PUBLIC MEDIA, 619 SOUTH 4TH STREET - LOUISVILLE, KY							
40202	61-1259787	509(A)(1)	201,130.	0.			A34 RADIO
UNIVERSITY OF LOUISVILLE ATHLETIC ASSOCIATION INC ATHLETIC DEPT. SAC BLDG, 2100 S. FLOYD STREET - LOUISVILLE, KY 40208	31_1106941	509(A)(3) TYPE I	200,000.	0.			B EDUCATIONAL INSTITUTIONS
10015V1111E, K1 40200	31 1100341	JUJ(K)(J) IIIE I	200,000.	<u> </u>			INSTITUTIONS
CENTRAL KENTUCKY COMMUNITY FOUNDATION INC - 200 JIM OWEN DRIVE - ELIZABETHTOWN, KY 42701	61-6035002	509(A)(1)	189,587.	0.			B11 SINGLE ORGANIZATION SUPPORT
WATERFRONT BOTANICAL GARDENS PO BOX 5056 LOUISVILLE, KY 40255	61-1297238	509(A)(1)	181,710.	0.			C40 BOTANICAL HORTICULTURAL AND LANDSCAPE SERVICES
BARDSTOWN HISTORIC DEVELOPMENT CORPORATION - 114 N 5TH ST, BOX 2 - BARDSTOWN, KY 40004	61-0843132	509(A)(2)	172,550.	0.			A80 HISTORICAL SOCIETIES AND RELATED ACTIVITIES
DUPONT MANUAL HIGH SCHOOL ALUMNI ASSOCIATION - 120 W. LEE STREET - LOUISVILLE, KY 40208	61-1229522	509(A)(2)	171,693.	0.			B84 ALUMNI ASSOCIATIONS
DARE TO CARE, INC. PO BOX 35458 LOUISVILLE, KY 40232	23-7345952	509(A)(1)	163,794.	0.			K31 FOOD BANKS FOOD PANTRIES
KENTUCKY CENTER FOR THE ARTS 501 WEST MAIN STREET LOUISVILLE, KY 40202-2989	31-0999046	509(A)(1)	163,500.	0.			A11 SINGLE ORGANIZATION SUPPORT
HOME OF THE INNOCENTS 1100 E MARKET ST LOUISVILLE, KY 40206	61-0445834	509(A)(1)	160,712.	0.			P30 CHILDREN'S AND YOUTH SERVICES

Schedule I (Form 990)

LOUISVILLE, INC. 31-0997017 Schedule I (Form 990)

sistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(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
						N50 RECREATIONAL PLEASURE
20-1635170	509(A)(1)	160 336.	0.			OR SOCIAL CLUB
		, -				
83-0965241	509(A)(2)	160,177.	0.			S30 ECONOMIC DEVELOPMENT
			_			X RELIGION SPIRITUAL
61-0444817	RELIGIOUS ORGANI	160,000.	0.			DEVELOPMENT
						B40 HIGHER ED
61-6001218	170(C)(1)	159 522	0			INSTITUTIONS
01 0001210	170(0)(1)	133,322.	0.			INSTITUTIONS
						D20 ANIMAL PROTECTION AND
						WELFARE (INCLUDES HUMANE
61-0463938	509(A)(2)	154,528.	0.			SOCIETIES AND SPCAS)
		,				
						L40 LOW-COST TEMPORARY
						HOUSING (INCLUDES YOUTH
83-4047022	509(A)(1)	151,035.	0.			HOSTELS)
						P42 SINGLE PARENT
61-1285124	509(A)(1)	150,761.	0.			AGENCIES/SERVICES
						P85 HOMELESS
61-0727110	509/A)/1)	150 224	0			SERVICES/CENTERS
01-0/2/110	P07(A/(I/	130,224.	0.			DERVICES/ CENTERS
ļ						
						A50 MUSEUMS & MUSEUM
02-0661784	509(A)(1)	150,000.	0.			ACTIVITIES
	(b) EIN 20-1635170 83-0965241 61-0444817 61-6001218 61-0463938 83-4047022 61-1285124	(b) EIN (c) IRC section	(c) IRC section if applicable (d) Amount of cash grant 20-1635170 509(A)(1) 160,336. 83-0965241 509(A)(2) 160,177. 61-0444817 RELIGIOUS ORGANI 160,000. 61-6001218 170(C)(1) 159,522. 61-0463938 509(A)(2) 154,528. 83-4047022 509(A)(1) 151,035. 61-1285124 509(A)(1) 150,761.	(b) EIN (c) IRC section if applicable (d) Amount of cash grant concash assistance cash grant cash	(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) 20-1635170 509(A)(1) 160,336. 0. 83-0965241 509(A)(2) 160,177. 0. 61-0444817 RELIGIOUS ORGANI 160,000. 0. 61-0463938 509(A)(2) 154,528. 0. 83-4047022 509(A)(1) 151,035. 0. 61-1285124 509(A)(1) 150,761. 0. 61-0727110 509(A)(1) 150,224. 0.	10 10 10 10 10 10 10 10

Schedule I (Form 990)

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Schedule I (Form 990)

Page 1 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 (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) FILSON HISTORICAL SOCIETY AKA FILSON CLUB, 1310 SOUTH THIRD A80 HISTORICAL SOCIETIES LOUISVILLE, KY 40208 61-0444690 509(A)(1) 143,812, 0. AND RELATED ACTIVITIES FAMILY COMMUNITY CLINIC INC 1420 E WASHINGTON ST E HEALTH-GENERAL & LOUISVILLE, KY 40206 27-2994215 509(A)(1) 141,966 0 REHABILITATIVE KENTUCKY COUNTRY DAY SCHOOL B20 ELEMENTARY SECONDARY 4100 SPRINGDALE ROAD LOUISVILLE, KY 40241 61-0731998 509(A)(1) 141,379 0. JEWISH COMMUNITY OF LOUISVILLE T70 FUNDRAISING INC. - D/B/A JEWISH FEDERATION OF ORGANIZATIONS THAT CROSS LOUISVILLE, 3600 DUTCHMANS LANE -CATEGORIES (INCLUDES LOUISVILLE, KY 40205 61-0444765 509(A)(1) 0 COMMUNITY FUNDS) 140,965. LOUISVILLE BALLET 315 EAST MAIN STREET 61-6033779 509(A)(1) LOUISVILLE, KY 40202 0. A63 BALLET 140,414, ASSUMPTION HIGH SCHOOL 2170 TYLER LANE LOUISVILLE, KY 40205 61-1133759 509(A)(1) 0. B25 SECONDARY/HIGH SCHOOL 137,321 HOLY TRINITY CHURCH 501 CHERRYWOOD ROAD 61-0507073 RELIGIOUS ORGANI LOUISVILLE KY 40207 135 850. 0. X20 CHRISTIAN BRIDGE KIDS INTERNATIONAL INC. 501 W KENWOOD DRIVE b33 international relief LOUISVILLE, KY 40214 84-1681205 509(A)(1) 130,600. 0. WEST END PREPARATORY SCHOOL 3628 VIRGINIA AVENUE B24 PRIMARY/ELEMENTARY 04-3798875 509(A)(1) LOUISVILLE, KY 40211 127 750 0. SCHOOL

31-0997017

Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	T
(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
SMOKETOWN FAMILY WELLNESS CENTER							
760 S HANCOCK ST SUITE B100							E32 AMBULATORY HEALTH
LOUISVILLE, KY 40203	47-4155748	509(A)(1)	127,111.	0.			CENTER COMMUNITY CLINIC
•			,				
CENTER FOR WOMEN AND FAMILIES							
P.O. BOX 2048							P43 FAMILY VIOLENCE
LOUISVILLE, KY 40201	61-0444846	509(A)(1)	125,280.	0.			SHELTERS AND SERVICES
KENTUCKY REFUGEE MINISTRIES, INC.							
969-B CHEROKEE ROAD							P20 HUMAN SERVICE
LOUISVILLE, KY 40204	61-1229842	509(A)(2)	122,095.	0.			ORGANIZATIONS
CAND TO CANADON AND AND AND AND TO CANADON AND CANADON							
CHRIST CHURCH UNITED METHODIST							W DDI IGION GDIDIMINI
4614 BROWNSBORO ROAD	61 0440611	DEL TATOUA ODANIT	100 700	_			X RELIGION SPIRITUAL
LOUISVILLE, KY 40207	01-0449011	RELIGIOUS ORGANI	120,700.	0.			DEVELOPMENT
ACTORS THEATRE OF LOUISVILLE, INC.							
316 WEST MAIN STREET							
LOUISVILLE, KY 40202	61-0645030	509(A)(1)	120,136.	0.			A65 THEATER
,							
PROEM SUPPORT MINISTRIES INC							
11601 MAIN ST.							
LOUISVILLE, KY 40243	90-0066630	509(A)(1)	120,000.	0.			X20 CHRISTIAN
SIMMONS COLLEGE OF KENTUCKY							
OFFICE OF DEVELOPMENT, 1000 S 4TH	5						B43 UNIVERSITY OR
LOUISVILLE, KY 40203	20-5289168	509(A)(1)	119,986.	0.			TECHNOLOGICAL
NEIGHBORHOOD HOUSE							
201 NORTH 25TH STREET				_			P28 NEIGHBORHOOD CENTER
LOUISVILLE, KY 40212	61-0445842	509(A)(1)	116,786.	0.			SETTLEMENT HOUSE
TOUTONTILE MEMBO DOLLGE BOUNDARTON							
LOUISVILLE METRO POLICE FOUNDATION 982 EASTERN PARKWAY BOX #5							TO 1 ALL TANCE / ADVIOCACY
LOUISVILLE, KY 40217	61-1498961	509/A\/1\	116,063.	0.			I01 ALLIANCE/ADVOCACY ORGANIZATIONS
HOOTS AT THE ' VI 40511	01-1430301	DU3(A)(I)	110,003.	<u> </u>			PUGUITATIONS

Schedule I (Form 990)

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LOUISVILLE, INC. 31-0997017 Schedule I (Form 990)

Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt 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
LINCOLN FOUNDATION							
4322 BISHOP LANE							B90 EDUCATIONAL SERVICES
LOUISVILLE, KY 40218	61-0449631	509(A)(1)	113,744.	0.			AND SCHOOLS-OTHER
			,,				
IGLESIA EVANGELICA CRISTIANA							X99 RELIGIOUS RELATED
ESPIRITUAL - 3696 HURRICANE HALL							SPIRITUAL DEVELOPMENT
ROAD - LEXINGTON, KY 40511	20-4961431	RELIGIOUS ORGANI	112,688.	0.			N.E.C.*
UNIVERSITY OF KENTUCKY							
FINANCIAL AID OFFICE, 128							
FUNKHOUSER BUILDING - LEXINGTON,							B43 UNIVERSITY OR
KY 40506-0054	61-6001218	509(A)(1)	112,673.	0.			TECHNOLOGICAL
LOUISVILLE COMMINITAL DECICAL CENTRED							
LOUISVILLE COMMUNITY DESIGN CENTER DBA CENTER FOR NEIGHBORHOODS, PO BO	.						L20 HOUSING DEVELOPMENT
LOUISVILLE, KY 40221	61-0889003	509(A)(1)	111,279.	0.			CONSTRUCTION MANAGEMENT
CABBAGE PATCH SETTLEMENT HOUSE							
INC 1413 SOUTH SIXTH STREET -							P28 NEIGHBORHOOD CENTER
LOUISVILLE, KY 40208	61-0458359	509(A)(1)	107,191.	0.			SETTLEMENT HOUSE
CREASEY MAHAN NATURE PRESERVE INC							
12501 HARMONY LANDING ROAD							C ENVIRONMENTAL QUALITY
GOSHEN, KY 40026	31-0908496	509(A)(1)	105,096.	0.			PROTECTION BEAUTIFICATION
CALLYAMION ADMY MADICONVILLE MY							
SALVATION ARMY-MADISONVILLE KY P.O. BOX 489							
MADISONVILLE, KY 42431	22-2406433	509(A)(1)	105,000.	0.			P24 SALVATION ARMY
MIDIONVILLE, RI 42451	22 2400433	303(11)(1)	103,000.	0.			24 SHEVIIION MAII
GUTHRIE OPPORTUNITY CENTER							
FOUNDATION INC 900 NUTTER DRIVE							P11 SINGLE ORGANIZATION
- BARDSTOWN, KY 40004	45-2999517	509(A)(1)	104,869.	0.			SUPPORT
KENTUCKY PILOTS ASSOCIATION							
EDUCATION FOUNDATION INC - 1924							B82 SCHOLARSHIPS STUDENT
BOSTON RD - BARDSTOWN, KY 40004	84-2892557	509(A)(1)	103,000.	0.			FINANCIAL AID AWARDS

Part II Continuation of Grants and Other		mestic Organizations	and Domestic Go	overnments (Scho	edule I (Form 990), Pa		31-0337017 Page
(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
JUNIOR ACHIEVEMENT OF KENTUCKIANA							
1401 W. MUHAMMAD ALI BLVD.							B20 ELEMENTARY SECONDARY
LOUISVILLE, KY 40203	61-0476694	509(A)(1)	102,544.	0.			ED
CHRISTIAN STUDENT FELLOWSHIP INC 502 COLUMBIA AVE LEXINGTON, KY 40508	61-0711889	509(A)(1)	102,000.	0.			B40 HIGHER ED INSTITUTIONS
ACADEMY OF MUSIC PRODUCTION EDUCATION AND DEVELOPMENT - 1219 W. JEFFERSON ST., SUITE 206 -	47 1112120	E00(2)(1)	101 040				D.C.O. MIJOZO
LOUISVILLE, KY 40203	47-1113120	509(A)(I)	101,848.	0.			A68 MUSIC
ST. MATTHEWS EPISCOPAL CHURCH 330 N. HUBBARDS LANE							X RELIGION SPIRITUAL
LOUISVILLE, KY 40207	61-0476701	RELIGIOUS ORGANI	101,847.	0.			DEVELOPMENT
GOOD NEWS SHELTER CORPORATION 115 E. ADAMS ST.							L41 TEMPORARY SHELTER FOR
LAGRANGE, KY 40031	61-1334374	509(A)(1)	101,841.	0.			THE HOMELESS
PILLAR 7408 HWY 329 CRESTWOOD, KY 40014-8884	61-1159539	509(A)(2)	101,479.	0.			P73 GROUP HOME (LONG-TERM PRIMARILY ASSISTED LIVING)
LOVE CITY INC							
2615 ALFORD AVE LOUISVILLE, KY 40212	47-5206106	509(A)(1)	101,000.	0.			P20 HUMAN SERVICE ORGANIZATIONS
BROOKGREEN GARDENS PO BOX 3368	ET 020055	E00(2)(0)	100.000				C41 BOTANICAL GARDENS ARBORETA AND BOTANICAL
PAWLEYS ISLAND, SC 29585	57-0380356	509(A)(2)	100,000.	0.			ORGANIZATIONS
KENTUCKIANAWORKS 410 WEST CHESTNUT STREET STE 200	46 405665		400.000				
LOUISVILLE, KY 40202	46-4856936	DU9(A)(1)	100,000.	0.			S31 URBAN COMMUNITY

31-0997017

Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt 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
NATIONAL REDISTRICTING FOUNDATION 17 E MONROE STREET #214 CHICAGO, IL 60603	82-0757693	509(A)(1)	100,000.	0.			R60 CIVIL LIBERTIES ADVOCACY
NEW ART PUBLICATIONS INC. AKA BOMB MAGAZINE, 80 HANSON PLACE BROOKLYN, NY 11217	13-3336695	509(A)(2)	100,000.	0.			A20 ARTS CULTURAL ORGANIZATIONS-MULTIPURPOSE
COLLEGE FOUNDATION OF THE UNIVERSITY OF VIRGINIA - P.O. BOX 37963 - BOONE, IA 50037	54-2009312	509(A)(1)	94,617.	0.			T99 OTHER PHILANTHROPY VOLUNTARISM AND GRANTMAKING FOUNDATIONS N.E.C.*
PLANNED PARENTHOOD OF INDIANA AND KENTUCKY - ATTN: DEVELOPMENT, PO BOX 397 - INDIANAPOLIS, IN 46206	13-1644147	509(A)(1)	93,771.	0.			E40 REPRODUCTIVE HEALTH CARE FACILITIES AND ALLIED SERVICES
NATIVITY ACADEMY AT ST. BONIFACE 529 E. LIBERTY STREET LOUISVILLE, KY 40202	51-0450314	509(A)(1)	88,872.	0.			B24 PRIMARY/ELEMENTARY SCHOOL
HEALING PLACE INC 1020 WEST MARKET ST. LOUISVILLE, KY 40202	61-1164775	509(A)(1)	88,156.	0.			F20 ALCOHOL DRUG AND SUBSTANCE ABUSE DEPENDENCY PREVENTION & TREATMENT
LOUISVILLE FREE PUBLIC LIBRARY FOUNDATION - 301 YORK STREET - LOUISVILLE, KY 40203	61-0969361	509(A)(1)	86,538.	0,			B70 LIBRARIES LIBRARY SCIENCE
AMERICAN CIVIL LIBERTIES UNION OF KENTUCKY FOUNDATION, INC 325 W MAIN ST SUITE 2210 - LOUISVILLE, KY 40202	61-6058569	509(A)(2)	86,158.	0.			R60 CIVIL LIBERTIES ADVOCACY
ST. JOSEPH CHURCH PO BOX 548 BARDSTOWN, KY 40004	61-0485640	RELIGIOUS ORGANI	85,226.	0.			X RELIGION SPIRITUAL DEVELOPMENT

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AMERICAN RED CROSS - WESTERN KENTUCKY CHAPTER - 1700 FREDERICA ST., SUITE 105 - OWENSBORO, KY	F2 010660F	500(3)(1)	05.000				M20 DISASTER PREPAREDNES
42301	53-0196605	509(A)(I)	85,000.	0.			AND RELIEF SERVICE
CULTIVATING THE YOUTH EXPERIENCE PO BOX 3134 LOUISVILLE, KY 40201	90-0666360	509(A)(1)	83,561.	0.			B12 FUNDRAISING AND/OR FUND DISTRIBUTION
LEGAL AID SOCIETY INC. 416 W. MUHAMMAD ALI BLVD. #300 LOUISVILLE, KY 40202	61-0537626	509(A)(1)	82,198.	0.			183 PUBLIC INTEREST LAW/LITIGATION
CHILDREN INCORPORATED PO BOX 72848 NORTH CHESTERFIELD, VA 23235	54-0761510	509(A)(1)	82,000.	0.			Q33 INTERNATIONAL RELIEF
KENTUCKY COLLEGE OF ART & DESIGN 505 W. ORMSBY AVENUE LOUISVILLE, KY 40203	27-2232797	509(A)(1)	80,500.	0.			B50 GRADUATE PROFESSIONAL
TREESLOUISVILLE PO BOX 5816 LOUISVILLE, KY 40255	47-3739795	509(A)(1)	77,361.	0.			C ENVIRONMENTAL QUALITY PROTECTION BEAUTIFICATION
COMMUNITY FOUNDATION OF WEST KENTUCKY - 333 BROADWAY SUITE 530 - PADUCAH, KY 42001	61-1304905	509(A)(1)	76,750.	0.			T30 PUBLIC FOUNDATIONS
WESTERN KENTUCKY UNIVERSITY 1906 COLLEGE HEIGHTS BLVD #11018, ATTN: STUDENT FINANCIAL AID - BOWLING GREE	61-6055628		76,050.	0.			B EDUCATIONAL INSTITUTIONS
ACTIVE HEROES 1022 RIDGEVIEW DRIVE SHEPHERDSVILLE, KY 40165	45-4138378	509(A)(1)	75,000.	0.			P20 HUMAN SERVICE ORGANIZATIONS

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Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	urt 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
NATIONAL STEM CELL FOUNDATION INC.							
462 S. 4TH STREET, STE. 1230							H40 SPECIFIC ORGAN
LOUISVILLE, KY 40202	83-0392250	509(A)(1)	74,252.	0.			RESEARCH
WATERSTEP							
AKA: EDGE OUTREACH INC, 625 MYRTLE							M20 DISASTER PREPAREDNESS
LOUISVILLE, KY 40208	61-1262016	509(A)(1)	73,741.	0.			AND RELIEF SERVICE
CATHOLIC CHARITIES OF LOUISVILLE							P99 HUMAN
INC 2911 S. FOURTH STREET -							SERVICES-MULTIPURPOSE &
LOUISVILLE, KY 40208	61-1239600	509(A)(1)	71,136.	0.			OTHER N.E.C.*
	01 1103000	000 (11) (1)	,1,100.	•			
SECOND PRESBYTERIAN CHURCH							
3701 OLD BROWNSBORO ROAD							
LOUISVILLE, KY 40207	61-0466721	RELIGIOUS ORGANI	70,280.	0.			X20 CHRISTIAN
			·				
SPONSOR 4 SUCCESS INC							
1219 WEST JEFFERSON STREET #205							P20 HUMAN SERVICE
LOUISVILLE, KY 40203	81-4780035	509(A)(1)	70,152.	0.			ORGANIZATIONS
ARCHDIOCESE OF LOUISVILLE							
CATHOLIC SERVICES APPEAL, PO BOX 3							
LOUISVILLE, KY 40232	61-0447247	509(A)(1)	69,950.	0.			X22 ROMAN CATHOLIC
YEW DELL INC.							C30 NATURAL RESOURCE
6220 OLD LAGRANGE ROAD							CONSERVATION AND
	61-1390688	500/3\/1\	68,843.	0.			PROTECTION AND
CRESTWOOD, KY 40014 SOUTHEAST CHRISTIAN CHURCH OF	01-1390000	509(A)(1)	00,043.	0.			PROTECTION
JEFFERSON COUNTY KENTUCKY INC							
920 BLANKENBAKER PKWY -							
	61-0850307	509/3\/1\	66 500	_			V20 CUDICTIAN
LOUISVILLE, KY 40243	01-002030/	DU3(A)(I)	66,500.	0.			X20 CHRISTIAN
BOYS & GIRLS CLUBS INC.							
AKA BOYS & GIRLS CLUBS OF							O23 BOYS AND GIRLS CLUBS
KENTUCKIANA, 3900 CRITTENDEN DRIVE	1	500/3\/1\	65 000	0.			
- LOUISVILLE, K	61-0568789	D03(W)(T)	65,906.	<u> </u>		1	(COMBINED)

(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
LOUISVILLE PRIDE FOUNDATION PO BOX 4341 LOUISVILLE, KY 40204	47-1945331	509(A)(1)	65,629.	0.			R01 ALLIANCE/ADVOCACY ORGANIZATIONS
NELSON COUNTY COMMUNITY CLINIC INC 300 WEST JOHN FITCH AVE. #200 - BARDSTOWN, KY 40004	20-4876401	509(A)(2)	65,000.	0.			E30 HEALTH TREATMENT FACILITIES (PRIMARILY OUTPATIENT)
THE HOPE BUSS INC 3131 S 2ND ST, SUITE 352 LOUISVILLE, KY 40208	83-2485907	509(A)(1)	62,463.	0.			P99 HUMAN SERVICES-MULTIPURPOSE & OTHER N.E.C.*
ST. JUDE CHILDREN'S RESEARCH HOSPITAL - 501 ST. JUDE PLACE - MEMPHIS, TN 38105	62-0646012	509(A)(1)	62,050.	0.			G98 PEDIATRICS
SACRED HEART SCHOOLS INC. 3115 LEXINGTON RD LOUISVILLE, KY 40206	61-1181710	509(A)(1)	61,726.	0.			B EDUCATIONAL INSTITUTIONS
CENTER FOR INTERFAITH RELATIONS INC PO BOX 70488 - LOUISVILLE, KY 40270	61-1149619	509(A)(1)	61,421.	0.			A82 HISTORICAL SOCIETIES & HISTORIC PRESERVATION
SIDE BY SIDE STUDIO 2528 FRANKFORT AVE. LOUISVILLE, KY 40206	47-1843740	509(A)(2)	60,200.	0.			A90 ARTS SERVICE ACTIVITIES/ ORGANIZATION
HEUSER HEARING & LANGUAGE ACADEMY INC 111 E KENTUCKY ST LOUISVILLE, KY 40203	61-0492369	509(A)(1)	59,343.	0.			B28 SPECIAL ED INSTITUTIONS/ SCHOOLS FO VISUALLY OR HEARING IMPAIRED LEARNING
ST. JOHN CENTER FOR THE HOMELESS 700 EAST MUHAMMAD ALI BOULEVARD LOUISVILLE, KY 40202-3614	61-1135907	509(A)(1)	59,136.	0.			L41 TEMPORARY SHELTER FO

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ISAAC W. BERNHEIM FOUNDATION INC.							
PO BOX 130, 2499 CLERMONT RD.							
CLERMONT, KY 40110	61-0444651	509(A)(1)	114,085.	0.			C36 FOREST CONSERVATION
		(, (,					
MARYHURST INC.							
1015 DORSEY LANE							
LOUISVILLE, KY 40223	31-1542209	509(A)(1)	58,080.	0.			P31 ADOPTION
·							
GREATER MUHLENBERG PARKS &							
RECREATION SYSTEM - 200 N PARK							
DRIVE - GREENVILLE, KY 42345	45-4955355	509(A)(1)	57,000.	0.			N32 PARKS AND PLAYGROUNDS
BETHLEHEM HIGH SCHOOL							
309 WEST STEPHEN FOSTER AVE.							B EDUCATIONAL
BARDSTOWN, KY 40004	61-0592028	509(A)(1)	56,162.	0.			INSTITUTIONS
FRANCIS PARKER SCHOOL OF							
LOUISVILLE - DEVELOPMENT							
DEPARTMENT, 11000 U.S. HWY. 42 -							B EDUCATIONAL
GOSHEN, KY 40026	31-0896538	509(A)(1)	55,959.	0.			INSTITUTIONS
MAIDEN VOYAGE PRODUCTIONS INC.							
2314 HIGGINS CANYON ROAD		500/53/03	55.600				
HALF MOON BAY, CA 94019	94-3191142	509(A)(2)	55,620.	0.			A31 FILM VIDEO
HOSPARUS, INC.							
C/O DEVELOPMENT DEPARTMENT, 6200							
DUTCHMANS LANE, STE 102 -	61 0001710	E00/3\/1\	EE E03	0.			P74 HOSPICE
LOUISVILLE, KY 40 KENTUCKY PERFORMING ARTS	61-0921718	509(A)(1)	55,593.	0.			P/4 HOSPICE
FOUNDATION, INC DBA KENTUCKY							
CENTER FOR THE PERFORMING ARTS,							A11 SINGLE ORGANIZATION
501 W. MAIN ST LOUISVILLE, KY	31-0999046	509(A)(1)	55,129.	0.			SUPPORT
TOT W. MAIN DI HOUISVILLE, KI	31 0333040	505(K)(I)	33,129.	0.			501101(1
KOSAIR CHARITIES COMMITTEE, INC.							
PO 950136							E12 FUNDRAISING AND/OR
LOUISVILLE, KY 40295-0136	61-0514703	509(A)(1)	54,729.	0.			FUND DISTRIBUTION

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Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
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NATIONAL SOCIETY OF COLONIAL DAMES							
OF AMERICA IN KENTUCKY - 202							A80 HISTORICAL SOCIETIES
WILKINSON ST - FRANKFORT, KY 40601	61-6029757	509(A)(2)	54,125.	0.			AND RELATED ACTIVITIES
GEORGETOWN COLLEGE		, , , , , , , ,					
DEVELOPMENT OFFFICE, 400 EAST							
COLLEGE STREET - GEORGETOWN, KY							B42 UNDERGRADUATE COLLEGE
40324	61-0444695	509(A)(1)	54,081.	0.			(4-YEAR)
YMCA OF CENTRAL KENTUCKY							
381 W. LOUDON AVE. LEXINGTON, KY 40508	61-0444842	509(3)(2)	52,750.	0.			O YOUTH DEVELOPMENT
ELECTION, RT 40300	01 0111012	303(11)(2)	32,730.	0.			C 100111 BEVELOTMENT
SALVATION ARMY - LEXINGTON							
736 W. MAIN ST							
LEXINGTON, KY 40508	22-2406433	509(A)(1)	52,500.	0.			P24 SALVATION ARMY
COLON CANCER PREVENTION PROJECT							
PO BOX 4039	00 4540540	500/53/43	50.400				E HEALTH-GENERAL &
LOUISVILLE, KY 40204	20-1510713	509(A)(1)	52,400.	0.			REHABILITATIVE
FOOD FOR THE POOR INC.							
6401 LYONS ROAD							
COCONUT CREEK, FL 33073	59-2174510	509(A)(1)	51,564.	0.			Q33 INTERNATIONAL RELIEF
JEFFERSON COUNTY PUBLIC EDUCATION							
FOUNDATION - VANHOOSE EDUCATION							
CENTER, 3332 NEWBURG ROAD -							B EDUCATIONAL
LOUISVILLE, KY 40218	61-1021128	509(A)(1)	50,705.	0.			INSTITUTIONS
MDINIMA HIGH GOVERN TOWNS TO							
TRINITY HIGH SCHOOL FOUNDATION							D11 CINCLE ODCANIZATION
INC 4011 SHELBYVILLE RD LOUISVILLE, KY 40207	31-1105966	509(3)(1)	50,500.	0.			B11 SINGLE ORGANIZATION SUPPORT
10010VIDDE, RI 4020/	31 1103900	207(K)(I)	30,300.	0.			POLLOKI
SHAKER VILLAGE OF PLEASANT HILL							
3501 LEXINGTON ROAD							
HARRODSBURG, KY 40330-8846	61-0592561	509(A)(2)	50,250.	0.			A54 HISTORY MUSEUMS

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE ARROW FUND INC. PO BOX 1127 PROSPECT, KY 40059	61-1396389	509(A)(1)	50,197.	0.			D20 ANIMAL PROTECTION AND WELFARE (INCLUDES HUMANE SOCIETIES AND SPCAS)
HABITAT FOR HUMANITY OF METRO LOUISVILLE, INC 1620 BANK STREET - LOUISVILLE, KY 40203	58-1735528	509(A)(1)	50,136.	0.			X20 CHRISTIAN
AMAZON BIODIVERSITY CENTER 1750 PENNSYLVANIA AVE NW RM 412 WASHINGTON, DC 20006	83-0572780	509(A)(1)	50,000.	0.			C34 LAND RESOURCES
BASILICA OF ST. JOSEPH PROTO-CATHEDRAL - 310 WEST STEPHEN FOSTER, PO BOX 548 - BARDSTOWN, KY 40004	61-0485640	RELIGIOUS ORGANI	50,000.	0.			X RELIGION SPIRITUAL DEVELOPMENT
CREATIVE CAPITAL FOUNDATION AKA NOT FOR PROFIT, 15 MAIDEN LANE NEW YORK, NY 10038	31-1605982	509(A)(1)	50,000.	0.			P20 HUMAN SERVICE ORGANIZATIONS
JOSHUA COMMUNITY CONNECTORS INC P.O. BOX 3133 LOUISVILLE, KY 40201	87-1604640	509(A)(2)	50,000.	0.			P30 CHILDREN'S AND YOUTH SERVICES
KENTUCKY UNITED METHODIST HOMES FOR CHILDREN & YOUTH - ATTN: DEVELOPMENT DEPARTMENT, 1115 ASHGROVE ROAD - NICHOLASVILLE, KY	61-0458375	509(A)(3) TYPE I	50,000.	0.			P20 HUMAN SERVICE ORGANIZATIONS
LOUISVILLE SOCCER FOUNDATION 801 EDITH RD LOUISVILLE, KY 40206	84-4488762	509(A)(1)	50,000.	0.			B99 EDUCATION N.E.C.*
PRESBYTERIAN CHURCH (U.S.A.), A CORPORATION - 100 WITHERSPOON STREET - LOUISVILLE, KY 40202	13-3462549	509(A)(1)	50,000.	0.			X21 PROTESTANT

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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 (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) COALITION FOR THE HOMELESS 1300 S 4TH ST. #250 L01 ALLIANCE/ADVOCACY LOUISVILLE, KY 40208 61-1118307 509(A)(2) 49,456 0. **ORGANIZATIONS** HOLY CROSS HIGH SCHOOL 5144 DIXIE HIGHWAY LOUISVILLE, KY 40216 61-1053991 RELIGIOUS ORGANI 47,949 0 B25 SECONDARY/HIGH SCHOOL RIVER FIELDS, INC. 1201 STORY AVENUE SUITE 215 C34 LAND RESOURCES LOUISVILLE, KY 40206 61-6032501 509(A)(1) 47,900 0. CONSERVATION F33 GROUP HOME RESIDENTIAL TREATMENT WELLSPRING INC. P.O. BOX 1927 FACILITY-MENTAL HEALTH LOUISVILLE, KY 40201 31-1020023 509(A)(2) 47,609. 0 RELATED HILDEGARD HOUSE PO BOX 5613 L99 OTHER HOUSING SHELTER 46-5555742 509(A)(1) 0. N.E.C.* LOUISVILLE, KY 40255 46,236. THE SALVATION ARMY - LOUISVILLE AREA COMMAND - 911 S. BROOK ST -LOUISVILLE, KY 40203 58-0660607 509(A)(1) 0. P24 SALVATION ARMY 46,142, WOODBERRY FOREST SCHOOL 402 WOODBERRY STATION WOODBERRY FOREST VA 22989 54-0519590 509(A)(1) 45 000 0. B25 SECONDARY/HIGH SCHOOL JEWISH FAMILY & CAREER SERVICES OF LOUISVILLE, INC. - P.O. BOX 32578 P20 HUMAN SERVICE - LOUISVILLE, KY 40232 61-0444704 509(A)(1) 44,561. 0. **ORGANIZATIONS** YOUNG AUTHORS GREENHOUSE 2509 PORTLAND AVENUE B90 EDUCATIONAL SERVICES 82-2878352 509(A)(1) LOUISVILLE, KY 40212 42 811. 0. AND SCHOOLS-OTHER

LOUISVILLE, INC. 31-0997017

Part II Continuation of Grants and Other A							
(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
HOPE SCARVES INC.							E86 PATIENT
141 N. SHERRIN AVENUE, SUITE #101							SERVICES-ENTERTAINMENT
LOUISVILLE, KY 40207	45-3578278	509(A)(1)	42,786.	0.			RECREATION
WAYSIDE CHRISTIAN MISSION							
PO BOX 7249							P20 HUMAN SERVICE
LOUISVILLE, KY 40257	61-0667139	509(A)(1)	42,407.	0.			ORGANIZATIONS
BRESCIA UNIVERSITY							
717 FREDERICA ST.							B42 UNDERGRADUATE COLLEGE
OWENSBORO, KY 42301	61-0660795	509(A)(1)	41,773.	0.			(4-YEAR)
YMCA OF GREATER LOUISVILLE							
METROPOLITAN OFFICE, 545 S. 2ND ST	R						
LOUISVILLE, KY 40202	61-0444843	509(A)(2)	41,443.	0.			P27 YMCA YWCA YWHA YMHA
SOUTH SANTA ROSA INTERFAITH							P99 HUMAN
MINISTRIES INC - 4339 GULF BREEZE							SERVICES-MULTIPURPOSE &
PARKWAY - GULF BREEZE, FL 32563	59-3690750	509(A)(1)	41,000.	0.			OTHER N.E.C.*
MURRAY STATE UNIVERSITY			,				
OFFICE OF STUDENT FINANCIAL AID/							
SCHOLARSHIP, 500 SPARKS HALL -							B11 SINGLE ORGANIZATION
MURRAY, KY 4	61-6053844	509(A)(1)	40,870.	0.			SUPPORT
THE CHILDREN'S INITIATIVE INC.							
15 CHADWICK ST.							Q12 FUNDRAISING AND/OR
PORTLAND, ME 04102	20-5106747	509(A)(1)	40,500.	0.			FUND DISTRIBUTION
BUSINESS & MINISTRY INITIATIVES,							
INC 1844 BOONE TRAIL -							
LOUISVILLE, KY 40245	82-4658775	509(A)(1)	40,000.	0.			B99 EDUCATION N.E.C.*
NATIONAL CHRISTIAN FOUNDATION							
KENTUCKY - PO BOX 175 - LEXINGTON,							T11 SINGLE ORGANIZATION
KY 40588	61-1404015	509(A)(1)	40,000.	0.			SUPPORT

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LOUISVILLE, INC. 31-0997017 Schedule I (Form 990)

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt 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
TAG MINISTRIES, INC.							
15200 DEER RUN RD LOUISVILLE, KY 40299	84-3151610	509(A)(1)	40,000.	0.			W70 LEADERSHIP DEVELOPMENT
OWENSBORO SYMPHONY ORCHESTRA 211 EAST 2ND STREET							
OWENSBORO, KY 42303	61-6055984	509(A)(1)	39,751.	0.			A69 SYMPHONY ORCHESTRAS
KENTUCKY EDUCATIONAL TELEVISION FOUNDATION, INC 600 COOPER							
DRIVE - LEXINGTON, KY 40502	61-0722558	509(A)(1)	38,429.	0.			A32 TELEVISION
CENTER FOR NONPROFIT EXCELLENCE 325 W. MAIN ST. WATERFRONT PLAZA,	1						T02 MANAGEMENT &
LOUISVILLE, KY 40202	20-0040424	509(A)(1)	38,150.	0.			TECHNICAL ASSISTANCE
KENTUCKY WATERWAYS ALLIANCE INC. 330 N. HUBBARDS LANE							C02 MANAGEMENT &
LOUISVILLE, KY 40207-2200	61-1239766	509(A)(1)	36,959.	0.			TECHNICAL ASSISTANCE
KENTUCKY SCIENCE CENTER 727 WEST MAIN STREET LOUISVILLE, KY 40202	31-1005850	509(A)(1)	36,496.	0.			A57 SCIENCE & TECHNOLOGY
PORTLAND MUSEUM 2308 PORTLAND AVENUE							A50 MUSEUMS & MUSEUM
LOUISVILLE, KY 40212	23-7422794	509(A)(1)	36,095.	0.			ACTIVITIES
CASA, INC. 982 EASTERN PKWY #9 LOUISVILLE, KY 40217-1566	61-1066568	509(A)(1)	36,000.	0.			I72 CHILD ABUSE PREVENTION OF
LOUISVILLE ASSOCIATION FOR			, ,				
COMMUNITY ECONOMICS - PO BOX 1501 - LOUISVILLE, KY 40201	82-1927610	509(A)(1)	35,252.	0.			S01 ALLIANCE/ADVOCACY ORGANIZATIONS

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Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
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MUHAMMAD ALI MUSEUM AND EDUCATION CENTER INC 144 N SIXTH ST - LOUISVILLE, KY 40202	61-1323046	509(A)(1)	35,050.	0.			A23 CULTURAL/ETHNIC AWARENESS
FOCUS BASKETBALL ACADEMY INC 2041 RIVER ROAD LOUISVILLE, KY 40206	83-2496747	509(A)(2)	35,000.	0.			N62 BASKETBALL
SHARA'S HOPE, INC. 4949 OLD BROWNSBORO RD, STE 249, LOUISVILLE, KY 40222	82-3536868	509(A)(1)	35,000.	0.			P80 SERVICES TO PROMOTE THE INDEPENDENCE OF SPECIFIC POPULATIONS
WESLEY HOUSE COMMUNITY SERVICES INC 5114 PRESTON HWY - LOUISVILLE, KY 40213	61-0449663	509(A)(1)	34,802.	0.			N31 COMMUNITY RECREATIONAL CENTERS
KENTUCKY NATURAL LANDS TRUST INC. 433 CHESTNUT ST. BEREA, KY 40403	61-1276913	509(A)(1)	34,750.	0.			C36 FOREST CONSERVATION
OWENSBORO COMMUNITY AND TECHNICAL COLLEGE FOUNDATION - 4800 NEW HARTFORD ROAD - OWENSBORO, KY 42303	61-1109704	509(A)(1)	34,523.	0.			B EDUCATIONAL INSTITUTIONS
UNIVERSITY OF VIRGINIA ADVANCEMENT SERVICES, PO BOX 37963 BOONE, IA 50037	54-6001796	509(A)(1)	34,500.	0.			B EDUCATIONAL INSTITUTIONS
THE CHAPEL OF ST. JAMES THE FISHERMAN - PO BOX 1334 - WELLFLEET, MA 02667	11-1646315	509(A)(1)	34,000.	0.			X RELIGION SPIRITUAL DEVELOPMENT
ST. BENEDICT CENTER FOR EARLY CHILDHOOD EDUCATION INC 946 S. 25TH ST LOUISVILLE, KY 40210	61-0719980	509(A)(2)	33,115.	0.			B21 KINDERGARTEN NURSERY SCHOOLS PRESCHOOL EARLY ADMISSIONS

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Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
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TEACH KENTUCKY							
907 BARRET AVE							B03 PROFESSIONAL
LOUISVILLE, KY 40204	20-4009920	509(A)(1)	33,086.	0.			SOCIETIES & ASSOCIATIONS
AWAKE MINISTRIES	20 1003320	303(11)(1)	33,000.	••			
AKA OPEN DOOR OF HOPE, 701							X99 RELIGIOUS RELATED
WASHINGTON ST - SHELBYVILLE, KY							SPIRITUAL DEVELOPMENT
40065	26-4436314	509/3\/1\	32,606.	0.			N.E.C.*
40003	20-4430314	309(A)(I)	32,000.	٠.			N.E.C.
FAMILY & CHILDREN'S PLACE							
525 ZANE ST.							
	61-0549561	E00/3\/1\	22 441	0.			P40 FAMILY SERVICES
LOUISVILLE, KY 40203	01-0549501	509(A)(1)	32,441.	٠.			F40 FAMILI SERVICES
RONALD MCDONALD HOUSE CHARITIES OF							
KENTUCKIANA, INC 550 SOUTH							T 0.0 OMNUED NONGENIA AND MED
FIRST STREET - LOUISVILLE, KY	21 1052465	500/31/41	20.404	_			L99 OTHER HOUSING SHELTER
40202	31-1053467	509(A)(1)	32,404.	0.			N.E.C.*
BAPTIST HEALTH FOUNDATION GREATER							
LOUISVILLE INC - DBA BAPTIST							L.,
HEALTH FOUNDATION, 4007 KRESGE WAY							E11 SINGLE ORGANIZATION
- LOUISVILLE, KY 40207	20-0292291	509(A)(3) TYPE I	32,000.	0.			SUPPORT
INIA GRUGINE TOD GUTINESS TNG							
WHAS CRUSADE FOR CHILDREN INC.							Dan guri paru'a ana warmi
520 W. CHESTNUT ST.		500/53/43	24 64 7				P30 CHILDREN'S AND YOUTH
LOUISVILLE, KY 40202	23-7075524	509(A)(1)	31,617.	0.			SERVICES
A EUND ING							
A FUND, INC.							Dag innan gebutan
PO BOX 221286	61 1025150	500/31/41	21 600	_			P20 HUMAN SERVICE
LOUISVILLE, KY 40252-1286	61-1237178	509(A)(1)	31,608.	0.			ORGANIZATIONS
THE TEMPLE-CONGREGATION ADATH							
ISRAEL BRITH SHOLOM - ATTN: CRAIG							L
GOLDSTEIN, 5101 U.S. HIGHWAY 42 -							X RELIGION SPIRITUAL
LOUISVILLE, KY 40241	61-0918772	509(A)(1)	31,289.	0.			DEVELOPMENT
DARTMOUTH COLLEGE							
GIFT RECORDING OFFICE, 6066							
DEVELOPMENT OFFICE - HANOVER, NH							B42 UNDERGRADUATE COLLEGE
03755	02-0222111	509(A)(1)	31,000.	0.			(4-YEAR)

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Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	art 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 DOCUMENTARY PHOTOGRAPHIC							
PROJECT - 1302 WILLOW AVENUE -							A20 ARTS CULTURAL
LOUISVILLE, KY 40204	47-2870323	509(A)(1)	30,652.	0.			ORGANIZATIONS-MULTIPURPOS
		(, (,	11,111	- •			
LOUISVILLE STORY PROGRAM							
851 S. 4TH ST.							
LOUISVILLE, KY 40203	47-5237414	509(A)(1)	30,466.	0.			A33 PRINTING PUBLISHING
			,				
NEW DAY MINISTRIES							
PO BOX 16266							B90 EDUCATIONAL SERVICES
LOUISVILLE, KY 40256	82-5402635	509(A)(2)	30,379.	0.			AND SCHOOLS-OTHER
CADMUS CORPORATION							
PO BOX 765							
WILTON, NH 03086	02-0360785	509(A)(2)	30,000.	0.			B60 ADULT CONTINUING ED
HARDIN MEMORIAL HOSPITAL							
FOUNDATION INC - 913 NORTH DIXIE							E HEALTH-GENERAL &
AVENUE - ELIZABETHTOWN, KY 42701	61-1251585	509(A)(1)	30,000.	0.			REHABILITATIVE
LOCAL INITIATIVES SUPPORT							\$20
CORPORATION - 28 LIBERTY STREET							COMMUNITY/NEIGHBORHOOD
34TH FLOOR - NEW YORK, NY 10005	13-3030229	509(A)(1)	30,000.	0.			DEVELOPMENT IMPROVEMENT
NATIONAL CHRISTIAN CHARITABLE							
FOUNDATION INC - CONTRIBUTION							
SERVICES, 11625 RAINWATER DRIVE							
#500 - ALPHARETTA, GA 30009	58-1493949	509(A)(1)	30,000.	0.			T30 PUBLIC FOUNDATIONS
SHELBY COUNTY PARKS AND RECREATION							
FOUNDATION - 717 BURKS BRANCH ROAD							N RECREATION SPORTS
- SHELBYVILLE, KY 40065	38-3818270	509(A)(1)	30,000.	0.			LEISURE ATHLETICS
JEFFERSON COMMUNITY & TECHNICAL							
COLLEGE FOUNDATION - ADVANCEMENT							
OFFICE, 109 E. BROADWAY -							B11 SINGLE ORGANIZATION
LOUISVILLE, KY 40202	23-7035648	509(A)(1)	29,500.	0.			SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
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LOUISVILLE VISUAL ART							
1538 LYTLE STREET							A40 VISUAL ARTS
LOUISVILLE, KY 40203	61-0492348	509(A)(1)	29,145.	0.			ORGANIZATIONS
CENTRAL PRESBYTERIAN CHURCH 318 WEST KENTUCKY STREET							
LOUISVILLE, KY 40203	61-0459493	509(A)(1)	29,036.	0.			X21 PROTESTANT
MANNA GLOBAL MINISTRIES INC. PO BOX 1291	65 1150005	500(3)(4)					
COOKEVILLE, TN 38503	65-1158805	509(A)(I)	29,000.	0.			X20 CHRISTIAN
SUMMIT ACADEMY OF GREATER LOUISVILLE INC 11508 MAIN STREET - LOUISVILLE, KY 40243	61-1214457	509(A)(1)	28,963.	0.			B20 ELEMENTARY SECONDARY
BINDET BOOLDVILLE, NI 10210	01 1211137	303(11)(1)	20,303.	•			
BROADWAY BAPTIST CHURCH 4000 BROWNSBORO ROAD							
LOUISVILLE, KY 40207	61-6001947	RELIGIOUS ORGANI	28,599.	0.			X20 CHRISTIAN
DOWN SYNDROME OF LOUISVILLE, INC. 5001 S HURSTBOURNE PARKWAY	54 4044405		00.550				
LOUISVILLE, KY 40291	61-1214126	509(A)(2)	28,579.	0.			G25 DOWN'S SYNDROME
INDIANA UNIVERSITY SOUTHEAST OFFICE OF STUDENT FINANCIAL							
ASSISTANCE LB100, 4201 GRANT LINE ROAD - NEW ALB	35-6001673	170(C)(1)	28,500.	0.			B EDUCATIONAL INSTITUTIONS
NOW NEW ADD	33 0001073	170(07(17	20,300.	<u> </u>			INSTITUTIONS
KMAC MUSEUM							
715 WEST MAIN STREET							A40 VISUAL ARTS
LOUISVILLE, KY 40202	61-0985312	509(A)(1)	28,492.	0.			ORGANIZATIONS
ANIMAL CARE SOCIETY INC.							D20 ANIMAL PROTECTION AND
12207 WESTPORT ROAD							WELFARE (INCLUDES HUMANE
LOUISVILLE, KY 40245	61-1053516	509(A)(1)	28,278.	0.			SOCIETIES AND SPCAS)

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(a) Name and address of	(b) [N]	(c) IRC section	(d) Amount of	(a) Amount of	(f) Mothod of	(a) Description of	(h) Durages of great
(a) Name and address of organization or government	(b) EIN	if applicable	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
JEFFERSON COMMUNITY AND TECHNICAL							
COLLEGE - OFFICE OF FINANCIAL AID,							
109 EAST BROADWAY - LOUISVILLE, KY							B EDUCATIONAL
40202	61-1320380	170(C)(1)	28,240.	0.			INSTITUTIONS
SPALDING UNIVERSITY							
OFFICE OF ADVANCEMENT &							
PHILANTHROPY, 845 S. THIRD ST							B43 UNIVERSITY OR
LOUISVILLE, KY 4020	61-0444780	509(A)(1)	27,886.	0.			TECHNOLOGICAL
WATER WITH BLESSINGS							M99 OTHER PUBLIC SAFETY
1902 CAMPUS PLACE, STE 11							DISASTER PREPAREDNESS AND
′	37-1639872	500/3\/1\	27 651	0.			RELIEF N.E.C.*
LOUISVILLE, KY 40299 FATHER MALONEY'S BOYS' HAVEN INC.	37-1039072	509(A)(I)	27,651.	0.			RELIEF N.E.C.
AKA BOYS AND GIRLS HAVEN, 2301							DEC DECEMBER CHARGE
GOLDSMITH LANE - LOUISVILLE, KY							P70 RESIDENTIAL CUSTODIAL
40218	61-0479621	509(A)(1)	56,363.	0.			CARE (GROUP HOME)
RIVER CITY DRUM CORP CULTURAL ARTS							
INSTITUTE INC 3308 CHAUNCEY							A20 ARTS CULTURAL
AVE LOUISVILLE, KY 40211	55-0820407	509(A)(1)	27,529.	0.			ORGANIZATIONS-MULTIPURPOS
CHRISTIAN ACADEMY OF LOUISVILLE							
700 SOUTH ENGLISH STATION RD.							B20 ELEMENTARY SECONDARY
LOUISVILLE, KY 40245	61-0907309	509(A)(1)	27,436.	0.			ED
							B28 SPECIAL ED
VISUALLY IMPAIRED PRESCHOOL							INSTITUTIONS/ SCHOOLS FOR
SERVICES INC - 1906 GOLDSMITH LANE							VISUALLY OR HEARING
- LOUISVILLE, KY 40218	61-1061973	509(A)(1)	27,273.	0.			IMPAIRED LEARNING
MDII OQV QQUOLADQUID HOUNDAMION							
TRILOGY SCHOLARSHIP FOUNDATION							
303 NORTH HURSTBOURNE PKWY	00 55555	500(5)(4)		_			B EDUCATIONAL
LOUISVILLE, KY 40222	20-5755082	509(A)(1)	27,000.	0.			INSTITUTIONS
GEORGETOWN UNIVERSITY							
GIFT PROCESSING, DEPARTMENT NUMBER							B EDUCATIONAL
WASHINGTON, DC 20057	53-0196603	509(A)(1)	26,000.	0.			INSTITUTIONS

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G.O. MINISTRIES 11501 PLANTSIDE DR STE 14 LOUISVILLE, KY 40299	36-4092893	509(A)(1)	25,500.	0.			X RELIGION SPIRITUAL DEVELOPMENT
WORLD VISION PO BOX 9716 FEDERAL WAY, WA 98063-9716	95-1922279	509(A)(1)	25,400.	0.			Q30 INTERNATIONAL DEVELOPMENT RELIEF SERVICES
KENTUCKY HORSE PARK FOUNDATION 4075 IRON WORKS PARKWAY BLDG D LEXINGTON, KY 40511	62-1257717	509(A)(1)	25,300.	0.			N69 EQUESTRIAN RIDING
COMMONWEALTH FUND FOR KET, INC. 600 COOPER DR LEXINGTON, KY 40502	61-1285473	509(A)(1)	25,276.	0.			B90 EDUCATIONAL SERVICES AND SCHOOLS-OTHER
NELSON COUNTY FISCAL COURT P.O. BOX 578, ONE COURT SQUARE BARDSTOWN, KY 40004	61-6000701	170(C)(1)	25,170.	0.			S COMMUNITY IMPROVEMENT
CARROLL UNIVERSITY INC 100 N. EAST AVENUE WAUKESHA, WI 53186	39-0806325	509(A)(1)	25,000.	0.			B90 EDUCATIONAL SERVICES AND SCHOOLS-OTHER
EDITH & HENRY HEUSER HEARING INSTITUTE - DBA HEUSER HEARING INSTITUTE, 111 E. KENTUCKY ST LOUISVILLE, KY 40203	61-1383955	509(A)(2)	25,000.	0,			H42 EAR AND THROAT
HARVEY BROWNE PRESBYTERIAN CHURCH 311 BROWNS LANE LOUISVILLE, KY 40207	61-0529829	RELIGIOUS ORGANI	25,000.	0.			X RELIGION SPIRITUAL DEVELOPMENT
HEIDELBERG UNIVERSITY OFFICE OF DEVELOPMENT, 310 E. MARK	E 34-4428219	509(A)(1)	25,000.	0.			B43 UNIVERSITY OR TECHNOLOGICAL

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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 (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) NANTUCKET COTTAGE HOSPITAL 57 PROSPECT STREET NANTUCKET, MA 02554 04-2103823 509(A)(1) 25,000 0. E22 HOSPITAL (GENERAL) NO MORE RED DOTS INC 3936 BRISTOL OAKS DR 199 CRIME LEGAL RELATED LOUISVILLE, KY 40299 83-1524454 509(A)(1) 25,000 0 N.E.C.* NORTON MUSEUM OF ART 1451 S. OLIVE AVE WEST PALM BEACH, FL 33401 59-0624432 509(A)(2) 25,000 0. A51 ART MUSEUMS PRESBYTERIAN HOMES & SERVICES OF KENTUCKY - PO BOX 18067 -P75 SENIOR CONTINUING 25,000. LOUISVILLE, KY 40261 61-1078924 509(A)(2) 0 CARE COMMUNITIES RECKONING INC. 2525 CLARENDON AVE 84-2692296 509(A)(2) LOUISVILLE, KY 40205-3033 0. A65 THEATER 25,000, SAINT ANN CATHOLIC CHURCH 475 9TH AVENUE SOUTH NAPLES, FL 34102 27-1988145 RELIGIOUS ORGANI 0. X20 CHRISTIAN 25,000 UNIVERSITY OF DAYTON 300 COLLEGE PARK B43 UNIVERSITY OR 31-0536715 509(A)(1) TECHNOLOGICAL DAYTON OH 45469 25 000 0. HOPKINS COUNTY EDUCATION FOUNDATION INC. - PO BOX 593 -B12 FUNDRAISING AND/OR MADISONVILLE, KY 42431 61-1151955 509(A)(1) 24,469. 0. FUND DISTRIBUTION INDIANA UNIVERSITY FOUNDATION P.O. BOX 6460 B11 SINGLE ORGANIZATION SUPPORT INDIANAPOLIS, IN 46206-6460 35-6018940 509(A)(1) 24 450 0.

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Part II Continuation of Grants and Other A		mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990). Pa		31-0997017 Page 1
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ST. JOSEPH CHILDREN'S HOME							P73 GROUP HOME (LONG-TERM
2823 FRANKFORT AVENUE							PRIMARILY ASSISTED
LOUISVILLE, KY 40206	61-0475286	509(A)(1)	24,436.	0.			LIVING)
USA CARES INC							
11760 COMMONWEALTH DRIVE							L01 ALLIANCE/ADVOCACY
LOUISVILLE, KY 40299	05-0588761	509(A)(1)	24,352.	0.			ORGANIZATIONS
PEACE EDUCATION PROGRAM INC.							
AKA PEACE ED, 318 W. KENTUCKY STRE	3						P30 CHILDREN'S AND YOUTH
LOUISVILLE, KY 40203	61-1220204	509(A)(1)	24,320.	0.			SERVICES
HHN2L INC							
6923 FRANKLIN FARMER WAY							B90 EDUCATIONAL SERVICES
LOUISVILLE, KY 40229	84-2329770	509(A)(1)	24,150.	0.			AND SCHOOLS-OTHER
PRESENTATION ACADEMY							
861 S. 4TH ST.							B EDUCATIONAL
LOUISVILLE, KY 40203	61-0507080	509(A)(1)	24,016.	0.			INSTITUTIONS
HISTORIC LOCUST GROVE INC.							
561 BLANKENBAKER LANE							
LOUISVILLE, KY 40207	61-1390403	509(A)(1)	23,964.	0.			A54 HISTORY MUSEUMS
OPERATION CARE INC.							
PO BOX 1393							P60 EMERGENCY ASSISTANCE
SHELBYVILLE, KY 40065	61-1211189	509(A)(1)	23,943.	0.			(FOOD CLOTHING CASH)
LA CASITA CENTER							
PO BOX 1844							
LOUISVILLE, KY 40201	74-3178408	509(A)(1)	23,928.	0.			P33 CHILD DAY CARE
RE:CENTER MINISTRIES							
733 EAST JEFFERSON ST.							
LOUISVILLE, KY 40202	61-1328488	509(A)(1)	23,752.	0.			X21 PROTESTANT

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DAVIDSON MEMORIAL UNITED METHODIST							V DDI IGION GDIDIEWN	
CHURCH - 265 SOUTH BUCKMAN STREET - SHEPHERDSVILLE, KY 40165	61-0537627	RELIGIOUS ORGANI	23,500.	0.			X RELIGION SPIRITUAL DEVELOPMENT	
WESTERN KENTUCKY UNIVERSITY			, , , ,					
CASHIER'S OFFICE, 1906 COLLEGE								
HEIGHTS BLVD #11022 - BOWLING							B43 UNIVERSITY OR	
GREEN, KY 42101	61-6055628	509(A)(1)	23,498.	0.			TECHNOLOGICAL	
SECOND CHANCES WILDLIFE CENTER								
487 GENTRY LANE							D30 WILDLIFE	
MT. WASHINGTON, KY 40047	27-0550327	509(A)(1)	23,265.	0.			PRESERVATION/PROTECTION	
HAND IN HAND MINISTRIES							P99 HUMAN	
518 N. 26TH STREET				_			SERVICES-MULTIPURPOSE &	
LOUISVILLE, KY 40212	61-1352889	509(A)(1)	23,129.	0.			OTHER N.E.C.*	
LOUISVILLE PRESBYTERIAN								
THEOLOGICAL SEMINARY - 1044 ALTA							DEO CRADUAME PROFESSIONAL	
VISTA ROAD - LOUISVILLE, KY 40205-1798	61-0444768	509/31/11	22,835.	0.			B50 GRADUATE PROFESSIONAL (SEPARATE ENTITIES)	
40203-1790	01-0444700	509(R)(I)	22,033.	0.			(SEFARATE ENTITIES)	
TRINITY HIGH SCHOOL								
4011 SHELBYVILLE ROAD							B11 SINGLE ORGANIZATION	
LOUISVILLE, KY 40207	61-1256093	RELIGIOUS ORGANI	22,742.	0.			SUPPORT	
DAVIS VIEWS DEPOSE								
PAWS WITH PURPOSE							P86 BLIND/VISUALLY	
PO BOX 5458 LOUISVILLE, KY 40255	20-0681397	509/3\(1\)	22,686.	0.			IMPAIRED CENTERS SERVICES	
	20 0001337	505(A)(I)	22,000.	· ·			IMIAIRED CENTERS SERVICES	
LINDSEY WILSON COLLEGE								
DEVELOPMENT OFFICE, 210 LINDSEY WI								
COLUMBIA, KY 42728	61-0444763	509(A)(1)	22,500.	0.			B99 EDUCATION N.E.C.*	
MADISONVILLE COMMUNITY COLLEGE								
FINANCIAL AID OFFICE, 2000 COLLEGE	(1 120020	170/0)/1)	00 500	_			B EDUCATIONAL	
MADISONVILLE, KY 42431	61-1320380	μ70(C)(1)	22,500.	0.			INSTITUTIONS	

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LOUISVILLE, INC. 31-0997017 Schedule I (Form 990)

Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt 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
ACADEMY OF OUR LADY OF MERCY							
DBA MERCY ACADEMY, 5801 FEGENBUSH							B EDUCATIONAL
LOUISVILLE, KY 40228	61-1116388	500/3\/1\	22,418.	0.			INSTITUTIONS
LOUISVILLE, KI 40220	01-1110300	509(A)(1)	22,410.	0.			INSTITUTIONS
DENISON UNIVERSITY							
100 WEST COLLEGE STREET							B42 UNDERGRADUATE COLLEGE
GRANVILLE, OH 43023	31-4379459	509(A)(1)	22,348.	0.			(4-YEAR)
WATERFRONT PARK FOUNDATION INC 129 EAST RIVER ROAD							
LOUISVILLE, KY 40202	61-1291149	509(A)(3) TYPE I	22,011.	0.			N32 PARKS AND PLAYGROUNDS
DUCKS UNLIMITED INC. ONE WATERFOWL WAY MEMPHIS, TN 38120	13-5643799	509(A)(1)	22,000.	0.			C32 WATER RESOURCE WETLANDS CONSERVATION & MANAGEMENT
ECKERD COLLEGE OFFICE OF ADVANCEMENT, 4200 54TH							
AVENUE SOUTH - ST. PETERSBURG, FL							B EDUCATIONAL
33711	59-0859121	509/31/11	22,000.	0.			INSTITUTIONS
VOLUNTEERS OF AMERICA MID-STATES AKA VOLUNTEERS OF AMERICA OF KENTUCKY, 570 S FOURTH ST #100 -	35 0033121	303(11)(1)	22,000.				INDITIONS
LOUISVILLE, KY	61-0480950	509(A)(1)	21,799.	0.			P26 VOLUNTEERS OF AMERICA
ROTARY FUND OF LOUISVILLE INC. 325 W MAIN STREET, SUITE 1808 LOUISVILLE, KY 40202	61-6029858	509(A)(1)	21,750.	0.			S80 COMMUNITY SERVICE CLUBS (KIWANIS LIONS JAYCEES ETC.)
ANCHAL INC.							
PO BOX 7392							P20 HUMAN SERVICE
LOUISVILLE, KY 40257	27-2959378	509(A)(1)	21,579.	0.			ORGANIZATIONS
KENTUCKY HUMANITIES COUNCIL INC. 206 E. MAXWELL ST.							
LEXINGTON, KY 40508	31-0981031	509(A)(1)	21,500.	0.			A26 ARTS COUNCIL/AGENCY

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KENTUCKY WESLEYAN COLLEGE OFFICE OF ADVANCEMENT, 3000 FREDERICA ST OWENSBORO, KY 42302	61-0466713	509(A)(1)	21,500.	0.			B42 UNDERGRADUATE COLLEGE (4-YEAR)
CAVE HILL HERITAGE FOUNDATION INC 701 BAXTER AVE. LOUISVILLE, KY 40204	56-2498254	509(A)(1)	21,202.	0.			Y50 CEMETERIES AND BURIAL SERVICES
EDUCATIONAL JUSTICE 200 YORK ST LOUISVILLE, KY 40203	27-0405207	509(A)(1)	21,154.	0.			B90 EDUCATIONAL SERVICES AND SCHOOLS-OTHER
EPISCOPAL CHURCH OF THE ADVENT 901 BAXTER AVE. LOUISVILLE, KY 40204	61-0459581	RELIGIOUS ORGANI	21,100.	0.			X RELIGION SPIRITUAL DEVELOPMENT
FELIX E. MARTIN, JR. FOUNDATION, INC 325 W. MAIN STREET SUITE 1110 - LOUSIVILLE, KY 40202	26-2193468	509(A)(3) TYPE I	21,000.	0.			S11 SINGLE ORGANIZATION SUPPORT
PIARIST SCHOOL 7279 STATE ROUTE 321, PO BOX 369 HAGER HILL, KY 41222	61-1177865	RELIGIOUS ORGANI	21,000.	0.			B EDUCATIONAL INSTITUTIONS
UNITED WAY OF SOUTHERN KENTUCKY, INC P. O. BOX 3330 - BOWLING GREEN, KY 42102	61-0590564	509(A)(1)	20,771.	0.			P20 HUMAN SERVICE ORGANIZATIONS
UNITED WAY OF HOPKINS COUNTY INC PO BOX 366 MADISONVILLE, KY 42431	61-0732633	509(A)(1)	20,700.	0.			T70 FUNDRAISING ORGANIZATIONS THAT CROSS CATEGORIES (INCLUDES COMMUNITY FUNDS)
FAIRNESS EDUCATION FUND 2263 FRANKFORT AVENUE LOUISVILLE, KY 40206	61-1230383	509(A)(1)	20,566.	0.			B90 EDUCATIONAL SERVICES AND SCHOOLS-OTHER

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PITT ACADEMY								
7515 WESTPORT ROAD								
LOUISVILLE, KY 40222	23-7066205	509(A)(2)	20,402.	0.			B94 PARENT TEACHER GROUP	
AED FOUNDATION INC.								
650 E ALGONQUIN RD STE 305								
SCHAUMBURG, IL 60173	36-3784945	509(A)(1)	20,000.	0.			B99 EDUCATION N.E.C.*	
APPALACHIAN RESEARCH & DEFENSE								
FUND OF KY - 120 N. FRONT STREET -								
PRESTONSBURG, KY 41653	61-0848948	509(A)(1)	20,000.	0.			I80 LEGAL SERVICES	
•			,					
BALLARD HIGH SCHOOL								
6000 BROWNSBORO ROAD							B EDUCATIONAL	
LOUISVILLE, KY 40222	61-1021128	170(C)(1)	20,000.	0.			INSTITUTIONS	
BUTTERFLY HOUSE OF SHELBY COUNTY							DAG EDMILY GOINGELING	
INC - 18 VILLAGE PLZ PMB 335 - SHELBYVILLE, KY 40065	46-2300488	509/3)/1)	20,000.	0.			P46 FAMILY COUNSELING MARRIAGE COUNSELING	
SHEDBIVILLE, KI 40003	40-2300400	509(R)(I)	20,000.	0.			MARKIAGE COUNSELING	
CLIFF HAGAN BOYS & GIRLS CLUB INC.								
3415 BUCKLAND SQUARE							023 BOYS AND GIRLS CLUBS	
OWENSBORO, KY 42301	61-0663746	509(A)(1)	20,000.	0.			(COMBINED)	
COMMUNITY CHURCH OF GOD								
1532 COLLEGE DRIVE							X RELIGION SPIRITUAL	
MOUNT CARMEL, IL 62863	37-1114891	509(A)(1)	20,000.	0.			DEVELOPMENT	
	0, 1111011		20,000.					
EVOLVE502 SCHOLARS FOUNDATION INC								
334 E BROADWAY							B82 SCHOLARSHIPS STUDENT	
LOUISVILLE, KY 40202	83-1897986	509(A)(1)	20,000.	0.			FINANCIAL AID AWARDS	
EXPLOITED CHILDREN'S HELP								
ORGANIZATION - 1411 ALGONQUIN PKWY							I72 CHILD ABUSE	
- LOUISVILLE, KY 40210	31-1094281	509(A)(1)	20,000.	0.			PREVENTION OF	
		1				1	L	

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Schedule I (Form 990) LOUISVILLE, INC.

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 (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV. assistance appraisal, other) LISA BAJORINAS LLC 2516 MEADOWLARK DR. CONTRACTOR FOR VOGT PROSPECT, KY 40059 84-4624776 FOR PROFIT 20,000 0. AWARDEE FUND NORTHERN KENTUCKY UNIVERSITY ACCOUNTS PAYABLE DEPT - AC611. 5320 CAMPUS DR - HIGHLANDS B EDUCATIONAL HEIGHTS, KY 41099 61-1010545 170(C)(1) 20,000 0 TNSTTTUTTONS REBOUND INC. 1535 W BROADWAY L20 HOUSING DEVELOPMENT LOUISVILLE, KY 40203 61-1150924 509(A)(1) 20,000 0. CONSTRUCTION MANAGEMENT RED BIRD MISSION INC 70 OUEENDALE CENTER B20 ELEMENTARY SECONDARY BEVERLY, KY 40913 61-0674373 509(A)(1) 20,000 0 TRIMBLE COUNTY 4-H COUNCIL 43 HIGH COUNTRY LANE, PO BOX 244 D50 YOUTH DEVELOPMENT 61-1395204 509(A)(1) BEDFORD, KY 40006 0. PROGRAMS 20,000 VIRGINIA CHANCE SCHOOL INC B21 KINDERGARTEN NURSERY 4200 LIME KILN LANE SCHOOLS PRESCHOOL EARLY LOUISVILLE, KY 40222-5999 61-0549871 509(A)(1) 0. ADMISSIONS 20,000 CASA OF THE RIVER REGION - OLDHAM COUNTY - PO BOX 225 - LA GRANGE. 172 CHILD ABUSE 61-1066568 509(A)(1) PREVENTION OF KY 40031 19 575. 0. SEVEN COUNTY SERVICES ATTN: REYLENE ROBINSON, 10401 LINN STATION ROAD SUITE 100 -F30 MENTAL HEALTH LOUISVILLE, KY 4 31-0939757 509(A)(1) 19,569. 0. THE EATMENT BIG BROTHERS BIG SISTERS OF KENTUCKIANA - 1519 GARDINER LANE 031 BIG BROTHER BIG SISTERS SUITE B - LOUISVILLE, KY 40218 61-6057856 509(A)(1) 19 356 0.

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Schedule I (Form 990) LOUISVILLE, INC. 31-0997017

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 (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) 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) 19,254 0. A54 HISTORY MUSEUMS LOUISVILLE GROWS INC. K99 OTHER FOOD 1641 PORTLAND AVENUE AGRICULTURE NUTRITION LOUISVILLE, KY 40203 27-0959401 509(A)(1) 19,129 0 N.E.C.* CENTRAL KENTUCKY COMMUNITY THEATRE INC. - 124 W. MAIN ST. -A61 PERFORMING ARTS SPRINGFIELD, KY 40069 26-4062796 509(A)(2) 19,113, 0. CENTERS ST. FRANCIS DESALES HIGH SCHOOL 425 W KENWOOD DR B EDUCATIONAL LOUISVILLE, KY 40214-2843 26-0689151 RELIGIOUS ORGANI 18,676. 0 ITNSTITUTIONS HARVARD UNIVERSITY PO BOX 419209 B43 UNIVERSITY OR 04-2103580 509(A)(1) CAMBRIDGE, MA 02441-9209 0. TECHNOLOGICAL 18,500. THE BACKSIDE LEARNING CENTER 3131 S. 2ND ST. #389 B EDUCATIONAL LOUISVILLE KY 40208 37-1803514 509(A)(1) 0. INSTITUTIONS 18,386, HABITAT FOR HUMANITY OWENSBORO-DAVIESS COUNTY - 2930 L20 HOUSING DEVELOPMENT 61-1140804 509(A)(1) CONSTRUCTION MANAGEMENT WEST 4TH ST - OWENSBORO KY 42301 18 330. 0. LOUISVILLE ZOO FOUNDATION, INC. 1100 TREVILIAN WAY D11 SINGLE ORGANIZATION SUPPORT LOUISVILLE, KY 40233-9902 31-0971742 509(A)(1) 18,206. 0. SISTER VISITOR CENTER 2235 W MARKET ST X RELIGION SPIRITUAL LOUISVILLE, KY 40212 61-1239600 509(A)(1) 0. DEVELOPMENT 18 056

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IMMACULATA CLASSICAL ACADEMY							
440 ZORN AVENUE							B20 ELEMENTARY SECONDARY
LOUISVILLE, KY 40206	27-3305618	509(A)(1)	17,676.	0.			ED
OUR LADY OF PROVIDENCE HIGH SCHOOL							
707 PROVIDENCE WAY							
CLARKSVILLE, IN 47129	35-0894977	RELIGIOUS ORGANI	17,676.	0.			 B25 SECONDARY/HIGH SCHOOL
BANDY CARROLL HELLIGE			,				
BCH PUBLIC RELATIONS, 307 W.							
MUHAMMAD ALI BLVD LOUISVILLE,							
KY 40202	61-1291338	FOR PROFIT	17,600.	0.			NONE
SPLENDID EVENTS, LLC							EINE FOR LOUISINILLE
ATTN: PAMELA BROADUS, PO BOX 727	27-2108050	EOD DDOETE	17 500	0.			FUND FOR LOUISVILLE EVENTS
PROSPECT, KY 40059	27-2108030	FOR PROFII	17,500.	0.			E A FIN I P
KENTUCKY SHAKESPEARE INC							
616 MYRTLE STREET							
LOUISVILLE, KY 40208	61-6036654	509(A)(1)	17,420.	0.			A65 THEATER
			-				
WATERFRONT DEVELOPMENT CORPORATION							
129 RIVER ROAD							N RECREATION SPORTS
LOUISVILLE, KY 40202	37-1642204	170(C)(1)	17,370.	0.			LEISURE ATHLETICS
BLESSINGS IN A BACKPACK INC							
PO BOX 950291							P20 HUMAN SERVICE
LOUISVILLE, KY 40295	26-1964620	509/31/11	17,086.	0.			ORGANIZATIONS
BOOLSVILLE, RI 40233	20 1304020	505(R)(1)	17,000.	<u> </u>			DIGANIZATIONS
DONORSCHOOSE INC.							
MAIL CODE: 6656, PO BOX 7247							
PHILADELPHIA, PA 19170-6656	13-4129457	509(A)(1)	17,007.	0.			B99 EDUCATION N.E.C.*
AMERICAN HEART ASSOCIATION			•				
GREAT RIVERS AFFILIATE -							
LOUISVILLE DIVISION, 240							G43 HEART AND CIRCULATORY
WHITTINGTON PARKWAY - LOUI	13-5613797	509(A)(1)	16,971.	0.			SYSTEM

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Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
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UNITED CRESCENT HILL MINISTRIES 150 S. STATE STREET LOUISVILLE, KY 40206	51-0166794	509(A)(1)	16,969.	0.			P20 HUMAN SERVICE ORGANIZATIONS
HOPE HEALTH CLINIC INC. 1025 SANIBEL WAY STE E LA GRANGE, KY 40031	46-5509958	509(A)(1)	16,952.	0.			E HEALTH-GENERAL & REHABILITATIVE
PRODIGAL MINISTRIES PO BOX 1484 CRESTWOOD, KY 40014	61-1275040	509(A)(1)	16,704.	0.			P50 PERSONAL SOCIAL SERVICES
CHANGE TODAY, CHANGE TOMORROW, INC 902 SOUTH 15TH STREET - LOUISVILLE, KY 40210	84-3715550	509(A)(2)	16,616.	0.			B25 SECONDARY/HIGH SCHOOL
EASTERN KENTUCKY UNIVERSITY OFFICE OF FINANCIAL AID, CPO 34-A RICHMOND, KY 40475	61-1011211	509(A)(1)	16,500.	0.			B EDUCATIONAL INSTITUTIONS
ORGANIC ASSOCIATION OF KENTUCKY PO BOX 22244 LEXINGTON, KY 40522	27-1207146	509(A)(2)	16,302.	0.			K20 AGRICULTURAL PROGRAMS
HORSESENSING, INC 270 BAGDAD ROAD SHELBYVILLE, KY 40065	83-2609641	509(A)(2)	16,212.	0.			F30 MENTAL HEALTH TREATMENT
IMPACT 100 LOUISVILLE 3044 BARDSTOWN ROAD #269 LOUISVILLE, KY 40205	84-3784887	509(A)(1)	16,100.	0.			T99 OTHER PHILANTHROPY VOLUNTARISM AND GRANTMAKING FOUNDATIONS N.E.C.*
COMMUNITY CATHOLIC CENTER INC. PO BOX 11065 LOUISVILLE, KY 40251	01-0785892	509(A)(1)	16,000.	0.			B82 SCHOLARSHIPS STUDENT FINANCIAL AID AWARDS

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (f) Method of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) PURDUE UNIVERSITY FINANCIAL AID, SCHLEMAN HALL RM 305, 475 STADIUM MALL DRIVE - WEST B EDUCATIONAL LAFAYETTE 35-6002041 170(C)(1) 16,000 0. INSTITUTIONS SPALDING UNIVERSITY OPERATING ACCOUNT, 845 SOUTH THIRD B42 UNDERGRADUATE COLLEGE LOUISVILLE, KY 40203 61-0444780 509(A)(1) 16,000 0 (4-YEAR) A PLACE TO SLEEP INC P99 HUMAN PO BOX 546 SERVICES-MULTIPURPOSE & SHELBYVILLE, KY 40066 83-2952455 509(A)(2) 15,796 0. OTHER N.E.C.* TWISTED PINK 8016 VINECREST AVENUE #2 LOUISVILLE, KY 40222 47-1140389 509(A)(2) 15,736, 0 T30 PUBLIC FOUNDATIONS HIGHLAND PRESBYTERIAN CHURCH 1011 CHEROKEE ROAD X RELIGION SPIRITUAL 61-0538145 RELIGIOUS ORGANI LOUISVILLE, KY 40204 0. DEVELOPMENT 15,600. ORPHAN CARE ALLIANCE 115 NORTH WATTERSON TRAIL STE 201 LOUISVILLE, KY 40243 26-4549276 509(A)(1) 0. P31 ADOPTION 15,479, A CURE FOR ROBERT INC 508 TIFFANY LN E12 FUNDRAISING AND/OR 85-1792143 509(A)(1) 0. LOUISVILLE, KY 40207 15 400 FUND DISTRIBUTION TEAM EXPANSION MINISTRIES X RELIGION SPIRITUAL 4112 OLD ROUTT RD LOUISVILLE, KY 40299 31-1043937 509(A)(1) 15,400. 0. DEVELOPMENT BLUEGRASS LAND CONSERVANCY 450 OLD VINE STREET SUITE 105 C34 LAND RESOURCES 61-1293032 509(A)(1) LEXINGTON, KY 40507 15 250 0. CONSERVATION

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EASTERN KENTUCKY UNIVERSITY							
FOUNDATION, INC 521 LANCASTER							B11 SINGLE ORGANIZATION
AVE COATES CPO 19A, 102 PERKINS BUILDING - RICHMOND, KY 40475	61-1131682	509(A)(1)	15,200.	0.			SUPPORT
	01 1101001	000 (11) (1)	10,2001				
ASSOCIATION OF COMMUNITY							
MINISTRIES INC - PO BOX 99545 -							X12 FUNDRAISING AND/OR
LOUISVILLE, KY 40269	61-1361750	509(A)(1)	15,188.	0.			FUND DISTRIBUTION
and a ampoya							
ABACO STRONG 5604 JORDAN ROAD							
BETHESDA, MD 20816	84-4453228	509/3\/1\	15,000.	0.			Q33 INTERNATIONAL RELIE
BETHESDA, MD 20010	04-4455220	509(A)(1)	15,000.	0.			Q33 INTERNATIONAL RELIEF
CHRISTIAN MISSION AID							
100 PINE STREET, STE 105							
ZEELAND, MI 49464	47-0710130	509(A)(1)	15,000.	0.			Q33 INTERNATIONAL RELIE
FRIENDS OF THE ENVIRONMENT							C30 NATURAL RESOURCE
301 W. ATLANTIC AVENUE, SUITE 0-5							CONSERVATION AND
DELRAY BEACH, FL 33444	35-2283352	509(A)(1)	15,000.	0.			PROTECTION
GROWING UP NEW MEXICO							
440 CERILLOS ROAD SUITE A							P01 ALLIANCE/ADVOCACY
SANTA FE, NM 87501	85-0163601	509(A)(1)	15,000.	0.			ORGANIZATIONS
,			,				
HINDMAN SETTLEMENT SCHOOL							
51 CENTER STREET, PO BOX 844							B24 PRIMARY/ELEMENTARY
HINDMAN, KY 41822	61-0447248	509(A)(1)	15,000.	0.			school
NODE CITY CHIPCH							
HOPE CITY CHURCH							DA2 INTUEDATMY OF
7515 3RD STREET ROAD	61-6086445	509/3\/1\	15,000.	0.			B43 UNIVERSITY OR TECHNOLOGICAL
LOUISVILLE, KY 40214 INDIANA UNIVERSITY-PURDUE	01-0000445	503(A)(1)	15,000.	0.			I ECHNOLOGICAL
UNIVERSITY INDIANAPOLIS - IUPUI							
OFFICE OF STUDENT SCHOLARSHIPS,							B EDUCATIONAL
CAMPUS CENTER 264, 420 UNIVERSITY	35-6001673	170(C)(1)	15,000.	0.			INSTITUTIONS

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Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	art II.)	1
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OVEDER VOIGE ING							F20 ALCOHOL DRUG AND
OXFORD HOUSE, INC.							SUBSTANCE ABUSE
1010 WAYNE AVE. #300	52-1582231	E00/3\/1\	15 000	0.			DEPENDENCY PREVENTION & TREATMENT
SILVER SPRINGS, MD 20910	32-1302231	503(A)(1)	15,000.	0.			IREAIMENI
STEPHEN SILLER TUNNEL TO TOWERS							
FOUNDATION - 2361 HYLAN BLVD -							B82 SCHOLARSHIPS STUDENT
STATEN ISLAND, NY 10306	02-0554654	509(A)(1)	15,000.	0.			FINANCIAL AID AWARDS
UNIVERSITY OF ALABAMA AT			<u> </u>				
BIRMINGHAM - UAB DEPT OF MEDICINE							
BDB477, 1530 3RD AVENUE SOUTH -							E60 HEALTH SUPPORT
BIRMINGHAM, AL 35294-0012	63-0649108	509(A)(2)	15,000.	0.			SERVICES
HOUSE OF RUTH INC.							
607 E. SAINT CATHERINE ST.							E60 HEALTH SUPPORT
LOUISVILLE, KY 40203	61-1231355	509(A)(1)	14,626.	0.			SERVICES
PORTLAND CHRISTIAN SCHOOL SYSTEM							L.,
INC 8509 WESTPORT RD	00 0010651	500/33/41	14.605				B20 ELEMENTARY SECONDARY
LOUISVILLE, KY 40242	20-2918651	509(A)(I)	14,625.	0.			ED
OPERATION PARENT INC.							
PO BOX 127							B EDUCATIONAL
BUCKNER, KY 40010	20-3857612	509(A)(1)	14,500.	0.			INSTITUTIONS
			 				
BRIDGEHAVEN INC.							
950 S FIRST ST.							F30 MENTAL HEALTH
LOUISVILLE, KY 40203	61-0548949	509(A)(1)	14,423.	0.			TREATMENT
LOUISVILLE ACADEMY OF MUSIC							
2740 FRANKFORT AVE							
LOUISVILLE, KY 40206	61-0530107	509(A)(1)	14,352.	0.			A68 MUSIC
KENTUCKY YOUTH ADVOCATES							
10200 LINN STATION ROAD SUITE 310	64 000000	500/33/41		-			R20 CIVIL RIGHTS ADVOCACY
LOUISVILLE, KY 40223	61-0929390	DU9(A)(I)	14,152.	0.			FOR SPECIFIC GROUPS

LOUISVILLE, INC. Schedule I (Form 990) 31-0997017

Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt 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
PRICHARD COMMITTEE FOR ACADEMIC							
EXCELLENCE - 2285 EXECUTIVE DR,							
SUITE 120 - KEXINGTON, KY 40505	61-1026214	509(A)(1)	14,100.	0.			B99 EDUCATION N.E.C.*
GRAND CANYON TRUST							C30 NATURAL RESOURCE
2601 N. FT. VALLEY RD.							CONSERVATION AND
FLAGSTAFF, AZ 86001	86-0512633	509(A)(1)	14,000.	0.			PROTECTION
OHIO VALLEY EDUCATIONAL FOUNDATION							
INC PO BOX 1249 - SHELBYVILLE,							B80 STUDENT SERVICES AND
KY 40066	61-1311091	509(A)(3) TYPE I	13,949.	0.			ORGANIZATIONS
			,				
AMERICAN CANCER SOCIETY - KENTUCKY							
PO BOX 2167							P20 HUMAN SERVICE
LEXINGTON, KY 40588	13-1788491	509(A)(1)	13,871.	0.			ORGANIZATIONS
GIMMED D D D GE I OUT GWILLE							
SUMMERBRIDGE LOUISVILLE 902 S. SHELBY ST.							
LOUISVILLE, KY 40203	31-1695835	509(A)(1)	13,593.	0.			B99 EDUCATION N.E.C.*
ECOISTIBLE, NI 10200	31 1033033	303(11)(1)	13,333.	•			B33 EBCONTION N.E.C.
CENTRE COLLEGE OF KENTUCKY							
600 W. WALNUT ST							B42 UNDERGRADUATE COLLEGE
DANVILLE, KY 40422	61-0444671	509(A)(1)	13,376.	0.			(4-YEAR)
LEE INITIATIVE							
610 W MAGNOLIA AVE							J01 ALLIANCE/ADVOCACY
LOUISVILLE, KY 40208	82-3884798	509(A)(1)	13,052.	0.			ORGANIZATIONS
KENTUCKY CIVIC ENGAGEMENT TABLE							
INC - 2508 PORTLAND AVE., STE. 14							
- LOUISVILLE, KY 40212	83-2413836	509(A)(1)	13,051.	0.			S21 COMMUNITY COALITIONS
UNIVERSITY OF NOTRE DAME							
OFFICE OF STUDENT FINANCIAL							
SERVICES, 115 MAIN BUILDING -							B EDUCATIONAL
NOTRE DAME, IN 465	35-0868188	509(A)(1)	13,000.	0.			INSTITUTIONS

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					appraisal, other)		or assistance
BARREN HEIGHTS CHRISTIAN RETREAT							N20 RECREATIONAL AND
CENTER INC 11420 WATTERSON							SPORTING CAMPS (DAY
	2-0121355	509(A)(1)	12,866.	0.			OVERNIGHT ETC.)
MALK MOTE G. AGNETAL							
HOLY ANGELS ACADEMY							
12201 OLD HENRY RD. LOUISVILLE, KY 40223 61	1-0845326	509(A)(1)	12,676.	0.			B99 EDUCATION N.E.C.*
,			,				
SAVING SUNNY INC.							D20 ANIMAL PROTECTION AND
2607 WILBURLOOK LN.							WELFARE (INCLUDES HUMANE
LOUISVILLE, KY 40220 35	5-2379448	509(A)(1)	12,600.	0.			SOCIETIES AND SPCAS)
							B28 SPECIAL ED
BLUEGRASS CENTER FOR AUTISM							INSTITUTIONS/ SCHOOLS FOR
1250 BARDSTOWN ROAD SUITE 15							VISUALLY OR HEARING
LOUISVILLE, KY 40204 27	7-2279128	509(A)(1)	12,579.	0.			IMPAIRED LEARNING
GRACE & GLORY LUTHERAN CHURCH							
12900 W HWY 42							
	1-1287694	509(A)(1)	12,500.	0.			X20 CHRISTIAN
INSTITUTE OF	1 120,031	303(11)(1)	12,500.	<u> </u>			in the second se
INDIAN RIVER HOSPITAL FOUNDATION							
INC PO BOX 128 - VERO BEACH, FL							E11 SINGLE ORGANIZATION
32961 59	9-0760215	509(A)(3) TYPE I	12,500.	0.			SUPPORT
NORTHEAST YMCA - LOUISVILLE							
9400 MILL BROOK RD.	1 0444043	F00/3\/0\	10 500	0			D27 104G2 114G2 114U2 104U2
	1-0444843	509(A)(Z)	12,500.	0.			P27 YMCA YWCA YWHA YMHA
UNIVERSITY OF SOUTHERN CALIFORNIA							
FINANCIAL AID OFFICE - SAS 324, 700 CHILDS WAY - LOS ANGELES, CA							B43 UNIVERSITY OR
, , , , , , , , , , , , , , , , , , ,	5-1642394	509(3)(1)	12,500.	0.			TECHNOLOGICAL
WORLD CENTRAL KITCHEN INC.	2 TO47334	303(R/(I/	12,500.	0.			LICINOLOGICAL
ATTN: DONOR SERVICES TEAM, 200							
MASSACHUSETTS AVE NW, 7TH FLOOR -							
, , , , , , , , , , , , , , , , , , ,	7-3521132	509(A)(1)	12,500.	0.			033 INTERNATIONAL RELIEF

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PATHLIGHT INTERNATIONAL INC							
9850 VON ALLMEN CT., STE. #201							
LOUISVILLE, KY 40241	27-0583447	509(A)(1)	12,500.	0.			Q33 INTERNATIONAL RELIEF
CEDAR LAKE FOUNDATION							
9505 WILLIAMSBURG PLAZA #200							P11 SINGLE ORGANIZATION
LOUISVILLE, KY 40222	61-1093278	509(A)(1)	12,494.	0.			SUPPORT
SOUTH LOUISVILLE COMMUNITY							
MINISTRIES INC 415 1/2 W.							
ASHLAND AVE - LOUISVILLE, KY 40214	31-0891259	509(A)(1)	12,489.	0.			X20 CHRISTIAN
WHITNEYSTRONG INC							
3044 BARDSTOWN RD., #125							R01 ALLIANCE/ADVOCACY
LOUISVILLE, KY 40205	83-1941981	509(A)(1)	12,406.	0.			ORGANIZATIONS
KIDS CENTER FOR PEDIATRIC							
THERAPIES - P.O. BOX 17630 -							
LOUISVILLE, KY 40217	61-0492378	509(A)(1)	12,279.	0.			G98 PEDIATRICS
RIVERPARK CENTER INC. 101 DAVIESS ST							A11 SINGLE ORGANIZATION
OWENSBORO, KY 42303	61-1147328	509(A)(1)	12,138.	0.			SUPPORT
	01 111/010	(11) (1)					
CROSSROADS PREGNANCY RESOURCE							
CENTER - PO BOX 696 - LA GRANGE,							
KY 40031	27-4097169	509(A)(1)	12,051.	0.			P47 PREGNANCY CENTERS
BEAVER DAM BAPTIST CHURCH							
343 S MAIN STREET							
BEAVER DAM, KY 42320	61-0561426	RELIGIOUS ORGANI	12,021.	0.			X20 CHRISTIAN
BEARGRASS CHRISTIAN CHURCH							
4100 SHELBYVILLE ROAD							X RELIGION SPIRITUAL
LOUISVILLE, KY 40207	61-1219287	509(A)(1)	12,015.	0.			DEVELOPMENT

LOUISVILLE, INC.

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Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt 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
FIRST PRESBYTERIAN CHURCH 1328 GRIFFITH AVENUE OWENSBORO, KY 42301	61-0469273	RELIGIOUS ORGANI	12,000.	0.			X RELIGION SPIRITUAL DEVELOPMENT
FULL SAIL, LLC 3300 UNIVERSITY BLVD WINTER PARK, FL 32792	59-2111456	FOR PROFIT	12,000.	0.			B EDUCATIONAL INSTITUTIONS
HENRY CLAY MEMORIAL FOUNDATION 120 SYCAMORE RD. LEXINGTON, KY 40502	61-0461732	509(A)(2)	12,000.	0.			A54 HISTORY MUSEUMS
TRIPLE TWELVE MINISTRIES AKA: METRO CHRISTIAN LEGAL AID, PO LOUISVILLE, KY 40209	46-5767383	509(A)(2)	12,000.	0.			180 LEGAL SERVICES
MAKE-A-WISH FOUNDATION OF KENTUCKY & INDIANA - 1230 LIBERTY BANK LANE SUITE 300 - LOUISVILLE, KY 40222	34-1471131	509(A)(2)	11,950.	0.			P20 HUMAN SERVICE ORGANIZATIONS
BRINGING JUSTICE HOME INC. 2121 GRINSTEAD DR LOUISVILLE, KY 40204	85-2167537	509(A)(1)	11,902.	0.			K30 FOOD SERVICE FREE FOOD DISTRIBUTION PROGRAMS
CAMBERWELL GRIEF SANCTUARY 9850 VON ALLMEN CT STE 201 LOUISVILLE, KY 40241	84-3179952	509(A)(1)	11,886.	0.			P20 HUMAN SERVICE ORGANIZATIONS
LIGHTHOUSE PROMISE INC. 5312 SHEPHERDSVILLE ROAD LOUISVILLE, KY 40228	61-1362760	509(A)(1)	11,771.	0.			X99 RELIGIOUS RELATED SPIRITUAL DEVELOPMENT N.E.C.*
MOREHEAD STATE UNIVERSITY OFFICE OF FINANCIAL AID AND SCHOLARSHIPS, 305 HOWELL-MCDOWELL BUILDING - MOR	61-1014029	170(C)(1)	11,700.	0.			B EDUCATIONAL INSTITUTIONS

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THE ENGLISH SPEAKING UNION -							
KENTUCKY BRANCH - 9907 WINGED FOOT							
DR LOUISVILLE, KY 40223	61-6053477	509(A)(2)	11,667.	0.			P HUMAN SERVICES
THE LINCOLN NATIONAL LIFE							
INSURANCE COMPANY - PO BOX							LIFE INSURANCE POLICY
7247-0477 - PHILADELPHIA, PA 19170	35-0472300	FOR PROFIT	11,540.	0.			PREMIUMS
CAMP QUALITY KENTUCKIANA							N20 RECREATIONAL AND
PO BOX 35474							SPORTING CAMPS (DAY
LOUISVILLE, KY 40232	38-2208796	509(A)(2)	11,500.	0.			OVERNIGHT ETC.)
I WOULD RATHER BE READING							
828 S. 6TH ST							N RECREATION SPORTS
LOUISVILLE, KY 40203	82-4974981	509(A)(2)	11,331.	0.			LEISURE ATHLETICS
KENTUCKY CHAMBER FOUNDATION INC							
464 CHENAULT ROAD							S11 SINGLE ORGANIZATION
FRANKFORT, KY 40601	61-1284992	509(A)(1)	11,200.	0.			SUPPORT
			·				
TOKEN III CLUB INC							
3439 BRECKENRIDGE LANE	21 0004066	E00/33/41	11 150	0			N60 AMATEUR SPORTS CLUBS
LOUISVILLE, KY 40220 KENTUCKY OPERA ASSOCIATION	31-0994066	509(A)(I)	11,152.	0.			LEAGUES
DEVELOPMENT DEPARTMENT, 708							
MAGAZINE STREET - LOUISVILLE, KY							
40203	61-6013111	509(A)(1)	11,000.	0.			A6A OPERA
LOCUS CAPITAL			 				
ATTN: ACCOUNTS RECEIVABLE, 110							
PEPPERS FERRY RD, NW -							DUE DILIGENCE REPORTS FOR
CHRISTIANSBURG, VA 240	81-4812627	FOR PROFIT	11,000.	0.			PRESTON/FINZER PROPERTY
NORTHEAST CHRISTIAN CHURCH							
9900 BROWNSBORO RD.							
LOUISVILLE, KY 40241	61-0941327	509(A)(1)	11,000.	0.			X20 CHRISTIAN

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (f) Method of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV. assistance appraisal, other) OHIO STATE UNIVERSITY OFFICE OF THE UNIVERSITY BURSAR P.O. BOX 183029 - COLUMBUS, OH B EDUCATIONAL 43218-3029 31-6025986 170(C)(1) 11,000 0. INSTITUTIONS WOUNDED WARRIOR PROJECT INC 4899 BELFORT RD. #300 W30 MILITARY/VETERANS' JACKSONVILLE, FL 32256 20-2370934 509(A)(1) 10,600 0 ORGANTZATTONS ST. JAMES EPISCOPAL CHURCH 401 LAGRANGE ROAD, P.O. BOX 433 X RELIGION SPIRITUAL PEWEE VALLEY, KY 40056 61-1041508 RELIGIOUS ORGANI 10,580 0. DEVELOPMENT KENTUCKY INTERFAITH POWER AND C30 NATURAL RESOURCE LIGHT INC - 4934 BROWNSBORO RD -CONSERVATION AND 26-1098830 509(A)(1) LOUISVILLE, KY 40222 0 PROTECTION 10,542. KENTUCKY RESOURCES COUNCIL INC. P.O. BOX 1070 C01 ALLIANCE/ADVOCACY 31-1042931 509(A)(1) FRANKFORT, KY 40602-1070 0. ORGANIZATIONS 10,500. VIETNAMESE COMMUNITY OF LOUISVILLE, INC. - 13293 O'BANNON P84 ETHNIC/IMMIGRANT STATION WAY - LOUISVILLE KY 40223 46-4122258 509(A)(2) 0. SERVICES 10,500 HIGHPOINT CHARITABLE SERVICES INC. 424 E MAIN ST, SUITE 7 LAGRANGE, KY 40031 46-4284885 509(A)(1) 10 452 0. X20 CHRISTIAN NATURE CONSERVANCY - UTAH CHAPTER C99 ENVIRONMENTAL QUALITY 559 E. SOUTH TEMPLE PROTECTION AND SALT LAKE CITY, UT 84102 53-0242652 509(A)(1) 10,440. 0. BEAUTIFICATION N.E.C.* KENTUCKY LIONS EYE FOUNDATION INC. G41 EYE DISEASES BLINDNESS & VISION 301 E. MUHAMMAD ALI BLVD. 61-0516171 509(A)(1) IMPAIRMENT LOUISVILLE, KY 40202-1594 10 211. 0.

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LOUISVILLE, INC. 31-0997017

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt 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
BATES COMMUNITY DEVELOPMENT CENTER							
1228 S. JACKSON STREET							
LOUISVILLE, KY 40203	61-1303937	509(A)(1)	10,200.	0.			S31 URBAN COMMUNITY
			,				
RAPTOR REHABILITATION OF KENTUCKY							
INC PO BOX 206186 - LOUISVILLE,							D30 WILDLIFE
KY 40250	61-1193464	509(A)(1)	10,195.	0.			PRESERVATION/PROTECTION
							B28 SPECIAL ED
LEARNING ALLY INC.							INSTITUTIONS/ SCHOOLS FOR
20 ROSZEL ROAD	12 1650245	E00/3\/1\	10 100	0			VISUALLY OR HEARING
PRINCETON, NJ 08540	13-1659345	509(A)(I)	10,190.	0.			IMPAIRED LEARNING
UP FOR WOMEN AND CHILDREN							
425 S 2ND STREET SUITE 100							A20 ARTS CULTURAL
LOUISVILLE, KY 40202	82-3049204	509(A)(1)	10,152.	0.			ORGANIZATIONS-MULTIPURPOSE
,			,				
COMMUNITY FOUNDATION OF LINCOLN							
COUNTY - PO BOX 2750 - RUIDOSO, NM							
88355	16-1740370	509(A)(1)	10,073.	0.			T31 COMMUNITY FOUNDATIONS
ART FM INC							
PO BOX 5103	45 4005040	500/53/43	10.000				
LOUISVILLE, KY 40205	45-4225349	509(A)(1)	10,070.	0.			A34 RADIO
ALPHA BETA LAMBDA CHAPTER							
EDUCATION FOUDATION - PO BOX 1248							B EDUCATIONAL
- LEXINGTON, KY 40588	31-0896719	509(A)(2)	10,000.	0.			INSTITUTIONS
•			, -				
ALPHA DELTA PI FOUNDATION INC.							
1386 PONCE DE LEON AVE. NE							B82 SCHOLARSHIPS STUDENT
ATLANTA, GA 30306	58-1507941	509(A)(1)	10,000.	0.			FINANCIAL AID AWARDS
_							
ALZHEIMER'S DISEASE RESEARCH							G41 EYE DISEASES
22512 GATEWAY CENTER DR, P O BOX 1		500/53/43	10.000				BLINDNESS & VISION
CLARKSBURG, MD 20871-1952	23-7337229	509(A)(1)	10,000.	0.			IMPAIRMENT

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LOUISVILLE, INC.

31-0997017

Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt 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
BIG TABLE INC							
2217 ALTA AVE LOUISVILLE, KY 40205	84-5117810	509(A)(1)	10,000.	0.			B99 EDUCATION N.E.C.*
BLUE RIDGE SCHOOL							
273 MAYO DRIVE ST. GEORGE, VA 22935	54-0505868	509(A)(1)	10,000.	0.			B25 SECONDARY/HIGH SCHOOL
CAMPBELLSVILLE UNIVERSITY							
1 UNIVERSITY DRIVE, UPO 783 CAMPBELLSVILLE, KY 42718-2799	61-0469267	509(A)(1)	10,000.	0.			B42 UNDERGRADUATE COLLEGE
CARE FOR CHILDREN OF THE EARTH INC							
1924 NEWBURG ROAD LOUISVILLE, KY 40205	84-1861889	509(A)(1)	10,000.	0.			012 FUNDRAISING AND/OR FUND DISTRIBUTION
CATHEDRAL OF THE ASSUMPTION			,				
433 SOUTH FIFTH STREET	61 0440554	DEL TATOUR ODGINI	10.000				X RELIGION SPIRITUAL
LOUISVILLE, KY 40202	61-0448554	RELIGIOUS ORGANI	10,000.	0.			DEVELOPMENT
CHILDREN'S HOSPITAL LOS ANGELES 4650 SUNSET BLVD #29							
LOS ANGELES, CA 90027	95-1690977	509(A)(1)	10,000.	0.			E24 HOSPITAL (SPECIALTY)
COCA-COLA SCHOLARS FOUNDATION							
PO BOX 442 ATLANTA, GA 30301	58-1686023	509(A)(1)	10,000.	0.			B82 SCHOLARSHIPS STUDENT FINANCIAL AID AWARDS
DEMOCRACY UNLIMITED OF HUMBOLDT							
COUNTY - PO BOX 188617 -							
SACRAMENTO, CA 95518	68-0394751	509(A)(1)	10,000.	0.			B99 EDUCATION N.E.C.*
FELLOWSHIP OF CHRISTIAN ATHLETES -							DEE DELIGIOUS LEADERS
UNIVERSITY OF LOUISVILLE - P.O BOX 21005 - LOUISVILLE, KY 40221	44-0610626	509(A)(1)	10,000.	0.			O55 RELIGIOUS LEADERSHIP YOUTH DEVELOPMENT

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Organization or government ff applicable cash grant noncash noncash cash grant cash grant noncash cash grant ca	Part II Continuation of Grants and Other A		mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	Page 1
PO BOX 150 HANCOCK, ME 04640 22-2849309 509(A)(1) 10,000. 0. METLANDS CONSERVAT MANAGEMENT FRIENDS OF THE GREAT SMOKY MOUNTAINS NATIONAL PARK - P.O. BOX 1660 - KODAK, TN 37764 62-1564782 509(A)(1) 10,000. 0. C12 FUNDRAISING AN FUND DISTRIBUTION HAZEL JOYCE WILEY CAREER & FINANCIAL LITERACY INSTITUTE - 330 MAIN 5T - SHELBEVILLE, KY 40065 INTERNATIONAL FOUNDATION FOR ELECTORAL SYSTEMS - 2011 CRYSTAL DRIVE, 10TH FLOOR - ARLINGTON, VA 22202 J. BROWN FOUNDATION 13615 FOREST BEND CIR LOUISVILLE, KY 40245 82-1610153 509(A)(1) 10,000. 0. W24 CITIZEN PARTIC D50 YOUTH DEVELOPM PROGRAMS KENTUCKY AUTHOR FORUM INC. 620 WEST MAIN STREET SUITE 602 LOUISVILLE, KY 40202 61-1301673 509(A)(1) 10,000. 0. RETLANDS CONSERVAT MANAGEMENT 0. 0. W24 CITIZEN PARTIC D50 YOUTH DEVELOPM PROGRAMS KENTUCKY AUTHOR FORUM INC. 620 WEST MAIN STREET SUITE 602 LOUISVILLE, KY 40202 61-1301673 509(A)(1) 10,000. 0. RETLANDS CONSERVAT MANAGEMENT 0. 0. RETLANDS CONSERVAT MANAGEMENT 0. 0. RETLANDS CONSERVAT MANAGEMENT 0. 0. 0. RETLANDS CONSERVAT MANAGEMENT 0. 0. POUNT DISTRIBUTION 0. W24 CITIZEN PARTIC D50 YOUTH DEVELOPM PROGRAMS KENTUCKY AUTHOR FORUM INC. 620 WEST MAIN STREET SUITE 602 LOUISVILLE, KY 40202 61-1301673 509(A)(1) 10,000. 0. RETLANDS CONSERVAT 0. 0. RETLANDS CONSERVAT 0. 0. RANGEMENT 0. 0. RETLANDS CONSERVAT 0. 0. RANGEMENT 0. 0. RETLANDS CONSERVAT 0. 0. RANGEMENT 0. 0. RANGEMENT 0. 0. RETLANDS CONSERVAT 0. 0. RANGEMENT 0. 0. RETLANDS CONSERVAT 0. 0. RANGEMENT 0. 0. RANGEMENT 0. 0. RETLANDS CONSERVAT 0. 0. RANGEMENT		(b) EIN	\ ',		noncash	valuation (book, FMV,		(h) Purpose of grant or assistance
PO BOX 150 HANCOCK, ME 04640 22-2849309 509(A)(1) 10,000. 0. METLANDS CONSERVAT MANAGEMENT FRIENDS OF THE GREAT SMOKY MOUNTAINS NATIONAL PARK - P.O. BOX 1660 - KODAK, TN 37764 62-1564782 509(A)(1) 10,000. 0. C12 FUNDRAISING AN FUND DISTRIBUTION HAZEL JOYCE WILEY CAREER & FINANCIAL LITERACY INSTITUTE - 330 MAIN ST - SHELBEVILLE, KY 40065 INTERNATIONAL FOUNDATION FOR ELECTORAL SYSTEMS - 2011 CRYSTAL DRIVE, 10TH FLOOR - ARLINGTON, VA 22202 J. BROWN FOUNDATION 13615 FOREST BEND CIR LOUISVILLE, KY 40245 82-1610153 509(A)(1) 10,000. 0. W24 CITIZEN PARTIC D50 YOUTH DEVELOPM PROGRAMS KENTUCKY AUTHOR FORUM INC. 620 WEST MAIN STREET SUITE 602 LOUISVILLE, KY 40202 61-1301673 509(A)(1) 10,000. 0. ORGANIZATIONS	FRENCHMAN BAY CONSERVANCY							C32 WATER RESOURCE
HANCOCK, ME 04640 22-2849309 509(A)(1) 10,000. 0. MANAGEMENT FRIENDS OF THE GREAT SMOKY MOUNTAINS NATIONAL PARK - P.O. BOX 1660 - KODAK, TN 37764 62-1564782 509(A)(1) 10,000. 0. PUND DISTRIBUTION HAZEL JOYCE WILEY CAREER & FINANCIAL LITERACY INSTITUTE - 330 MAIN ST - SHELBYVILLE, KY 40065 20-3329409 509(A)(1) 10,000. 0. B30 VOCATIONAL TEC HITTERNATIONAL FOUNDATION FOR ELECTORAL SYSTEMS - 2011 CRYSTAL DRIVE, 10TH FLOOR - ARLINGTON, VA 22202 52-1527835 509(A)(1) 10,000. 0. W24 CITIZEN PARTIC J. BROWN FOUNDATION 13615 FOREST BEND CIR LOUISVILLE, KY 40245 82-1610153 509(A)(1) 10,000. 0. PROGRAMS KENTUCKY AUTHOR FORUM INC. 620 WEST MAIN STREET SUITE 602 LOUISVILLE, KY 40202 61-1301673 509(A)(1) 10,000. 0. O. ORGANIZATIONS LIFESONG FOR ORPHANS INC FO BOX 9								WETLANDS CONSERVATION &
MOUNTAINS NATIONAL PARK - P.O. BOX 1660 - KODAK, TN 37764 62-1564782 509(A)(1) 10,000. 0. EUROPHIANS INC PO BOX 9	HANCOCK, ME 04640	22-2849309	509(A)(1)	10,000.	0.			
1660 - KODAK, TN 37764 62-1564782 509(A)(1) 10,000. 0. FUND DISTRIBUTION HAZEL JOYCE WILEY CAREER & FINANCIAL LITERACY INSTITUTE - 330 MAIN ST - SHELBYVILLE, KY 40065 20-3329409 509(A)(1) 10,000. 0. B30 VOCATIONAL TEC INTERNATIONAL FOUNDATION FOR ELECTORAL SYSTEMS - 2011 CRYSTAL DRIVE, 10TH FLOOR - ARLINGTON, VA 22202 52-1527835 509(A)(1) 10,000. 0. W24 CITIZEN PARTIC J. BROWN FOUNDATION 13615 FOREST BEND CIR LOUISVILLE, KY 40245 82-1610153 509(A)(1) 10,000. 0. PROGRAMS KENTUCKY AUTHOR FORUM INC. 620 WEST MAIN STREET SUITE 602 LOUISVILLE, KY 40202 61-1301673 509(A)(1) 10,000. 0. DRIVEN ATTORNMENT OF BOX 9	FRIENDS OF THE GREAT SMOKY							
HAZEL JOYCE WILEY CAREER & FINANCIAL LITERACY INSTITUTE - 330 MAIN ST - SHELBYVILLE, KY 40065 Z0-3329409 509(A)(1) 10,000. 0. B30 VOCATIONAL TEC B10 VOCATIONAL TEC B10 VOCATIONAL TEC B10 VOCATIONAL TEC B11 VITERACTIONAL FOUNDATION FOR ELECTORAL SYSTEMS - 2011 CRYSTAL DRIVE, 10TH FLOOR - ARLINGTON, VA B11 STOREST BEND CIR LOUISVILLE, KY 40245 B2-1610153 509(A)(1) 10,000. 0. W24 CITIZEN PARTIC CENTUCKY AUTHOR FORUM INC. B11 STOREST BEND CIR CENTUCKY AUTHOR FORUM INC. B12 VOCATIONAL TEC B13 VOCATIONAL TEC B13 VOCATIONAL TEC B14 VOCATIONAL TEC B15 VOUTH DEVELOPM D15 VOUTH DEVELOPM PROGRAMS A70 HUMANITIES DRIVE, KY 40202 B17 HUMANITIES DRIVE, KY 40202 B18 VOCATIONAL TEC B19 VOCATIONAL TEC B10 VO	MOUNTAINS NATIONAL PARK - P.O. BOX							C12 FUNDRAISING AND/OR
### FINANCIAL LITERACY INSTITUTE - 330 MAIN ST - SHELBYVILLE, KY 40065 20-3329409 509(A)(1) 10,000. 0. B30 VOCATIONAL TECTOR ELECTORAL SYSTEMS - 2011 CRYSTAL DRIVE, 10TH FLOOR - ARLINGTON, VA 22202 52-1527835 509(A)(1) 10,000. 0. W24 CITIZEN PARTICE DESCRIPTION OF W25 CITIZEN PARTICE DESCRIPTION OF W26 CITIZEN PARTICE DESCRIPTION OF W27 CITIZEN PARTICE DESCRIPTION OF W27 CITIZEN PARTICE DESCRIPTION OF W28 CITIZEN PARTICE DESCRIPTION OF W28 CITIZEN PARTICE DESCRIPTION OF W29 CITIZEN PARTICE DESCRIPTI	1660 - KODAK, TN 37764	62-1564782	509(A)(1)	10,000.	0.			FUND DISTRIBUTION
MAIN ST - SHELBYVILLE, KY 40065 20-3329409 509(A)(1) 10,000. 0. B30 VOCATIONAL TECTION TECTION TO BELECTORAL SYSTEMS - 2011 CRYSTAL DRIVE, 10TH FLOOR - ARLINGTON, VA 22202 52-1527835 509(A)(1) 10,000. 0. W24 CITIZEN PARTIC J. BROWN FOUNDATION 13615 FOREST BEND CIR LOUISVILLE, KY 40245 82-1610153 509(A)(1) 10,000. 0. PROGRAMS KENTUCKY AUTHOR FORUM INC. 620 WEST MAIN STREET SUITE 602 LOUISVILLE, KY 40202 61-1301673 509(A)(1) 10,000. 0. O. ORGANIZATIONS LIFESONG FOR ORPHANS INC PO BOX 9	HAZEL JOYCE WILEY CAREER &							
INTERNATIONAL FOUNDATION FOR ELECTORAL SYSTEMS - 2011 CRYSTAL DRIVE, 10TH FLOOR - ARLINGTON, VA 22202 52-1527835 509(A)(1) 10,000. 0. W24 CITIZEN PARTIC J. BROWN FOUNDATION 13615 FOREST BEND CIR LOUISVILLE, KY 40245 82-1610153 509(A)(1) 10,000. 0. PROGRAMS KENTUCKY AUTHOR FORUM INC. 620 WEST MAIN STREET SUITE 602 LOUISVILLE, KY 40202 61-1301673 509(A)(1) 10,000. 0. ORGANIZATIONS LIFESONG FOR ORPHANS INC PO BOX 9	FINANCIAL LITERACY INSTITUTE - 330							
ELECTORAL SYSTEMS - 2011 CRYSTAL DRIVE, 10TH FLOOR - ARLINGTON, VA 22202 52-1527835 509(A)(1) 10,000. 0. W24 CITIZEN PARTIC J. BROWN FOUNDATION 13615 FOREST BEND CIR LOUISVILLE, KY 40245 82-1610153 509(A)(1) 10,000. 0. PROGRAMS KENTUCKY AUTHOR FORUM INC. 620 WEST MAIN STREET SUITE 602 LOUISVILLE, KY 40202 61-1301673 509(A)(1) 10,000. 0. ORGANIZATIONS LIFESONG FOR ORPHANS INC FO BOX 9	MAIN ST - SHELBYVILLE, KY 40065	20-3329409	509(A)(1)	10,000.	0.			B30 VOCATIONAL TECHNICAL
DRIVE, 10TH FLOOR - ARLINGTON, VA 22202 52-1527835 509(A)(1) 10,000. 0. W24 CITIZEN PARTIC J. BROWN FOUNDATION 13615 FOREST BEND CIR LOUISVILLE, KY 40245 82-1610153 509(A)(1) 10,000. 0. PROGRAMS KENTUCKY AUTHOR FORUM INC. 620 WEST MAIN STREET SUITE 602 LOUISVILLE, KY 40202 61-1301673 509(A)(1) 10,000. 0. O. ORGANIZATIONS LIFESONG FOR ORPHANS INC PO BOX 9	INTERNATIONAL FOUNDATION FOR							
22202 52-1527835 509(A)(1) 10,000. 0. W24 CITIZEN PARTIC J. BROWN FOUNDATION 13615 FOREST BEND CIR LOUISVILLE, KY 40245 82-1610153 509(A)(1) 10,000. 0. PROGRAMS KENTUCKY AUTHOR FORUM INC. 620 WEST MAIN STREET SUITE 602 LOUISVILLE, KY 40202 61-1301673 509(A)(1) 10,000. 0. ORGANIZATIONS LIFESONG FOR ORPHANS INC PO BOX 9	ELECTORAL SYSTEMS - 2011 CRYSTAL							
J. BROWN FOUNDATION 13615 FOREST BEND CIR LOUISVILLE, KY 40245 82-1610153 509(A)(1) 10,000. 0. PROGRAMS KENTUCKY AUTHOR FORUM INC. 620 WEST MAIN STREET SUITE 602 LOUISVILLE, KY 40202 61-1301673 509(A)(1) 10,000. 0. ORGANIZATIONS LIFESONG FOR ORPHANS INC PO BOX 9	DRIVE, 10TH FLOOR - ARLINGTON, VA							
13615 FOREST BEND CIR LOUISVILLE, KY 40245 82-1610153 509(A)(1) 10,000. 0. RENTUCKY AUTHOR FORUM INC. 620 WEST MAIN STREET SUITE 602 LOUISVILLE, KY 40202 61-1301673 509(A)(1) 10,000. 0. A70 HUMANITIES ORGANIZATIONS LIFESONG FOR ORPHANS INC PO BOX 9	22202	52-1527835	509(A)(1)	10,000.	0.			W24 CITIZEN PARTICIPATION
13615 FOREST BEND CIR LOUISVILLE, KY 40245 82-1610153 509(A)(1) 10,000. 0. RENTUCKY AUTHOR FORUM INC. 620 WEST MAIN STREET SUITE 602 LOUISVILLE, KY 40202 61-1301673 509(A)(1) 10,000. 0. A70 HUMANITIES ORGANIZATIONS LIFESONG FOR ORPHANS INC PO BOX 9	T BROWN FOIINDATION							
LOUISVILLE, KY 40245 82-1610153 509(A)(1) 10,000. 0. PROGRAMS KENTUCKY AUTHOR FORUM INC. 620 WEST MAIN STREET SUITE 602 LOUISVILLE, KY 40202 61-1301673 509(A)(1) 10,000. 0. ORGANIZATIONS LIFESONG FOR ORPHANS INC PO BOX 9	·							050 YOUTH DEVELOPMENT
KENTUCKY AUTHOR FORUM INC. 620 WEST MAIN STREET SUITE 602 LOUISVILLE, KY 40202 61-1301673 509(A)(1) 10,000. 0. LIFESONG FOR ORPHANS INC PO BOX 9		82-1610153	509(A)(1)	10,000.	0.			
620 WEST MAIN STREET SUITE 602 LOUISVILLE, KY 40202 61-1301673 509(A)(1) 10,000. 0. A70 HUMANITIES ORGANIZATIONS LIFESONG FOR ORPHANS INC PO BOX 9	,			, ,	-			
LIFESONG FOR ORPHANS INC PO BOX 9	KENTUCKY AUTHOR FORUM INC.							
LIFESONG FOR ORPHANS INC PO BOX 9	620 WEST MAIN STREET SUITE 602							A70 HUMANITIES
PO BOX 9	LOUISVILLE, KY 40202	61-1301673	509(A)(1)	10,000.	0.			ORGANIZATIONS
PO BOX 9	LIFESONG FOR ORPHANS INC							
		35-1902841	509(A)(1)	10,000.	0.			Q33 INTERNATIONAL RELIEF
	,			<u> </u>				
LONGBOAT ISLAND CHAPEL INC	LONGBOAT ISLAND CHAPEL INC							
6200 GULF OF MEXICO DR	6200 GULF OF MEXICO DR							
LONGBOAT KEY, FL 34228 59-1114318 509(A)(1) 10,000. 0. X20 CHRISTIAN	LONGBOAT KEY, FL 34228	59-1114318	509(A)(1)	10,000.	0.			X20 CHRISTIAN
MARINE CORPS COORDINATING COUNCIL	MARINE CORPS COORDINATING COUNCIL							
								W30 MILITARY/VETERANS'
PROSPECT, KY 40059 61-1195685 509(A)(1) 10,000. 0. ORGANIZATIONS		61-1195685	509(A)(1)	10,000.	0.			·

(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
MOVEMENT STRATEGY CENTER							
436 14TH STREET STE 500							O50 YOUTH DEVELOPMENT
OAKLAND, CA 94612	20-1037643	509(A)(1)	10,000.	0.			PROGRAMS
NATURE CONSERVANCY - VIRGINIA							C30 NATURAL RESOURCE
552 PETER JEFFERSON PARKWAY STE 10) D						CONSERVATION AND
CHARLOTTESVILLE, VA 22911	53-0242652	509(A)(1)	10,000.	0.			PROTECTION
NEW MUSEUM OF CONTEMPORARY ART							
235 BOWERY							
NEW YORK, NY 10002	13-2986881	509(A)(1)	10,000.	0.			A51 ART MUSEUMS
ONE STORY INC.	13 2300001	303(11)(1)	10,000.	•			III IIII IIODDOIID
THE OLD AMERICAN CAN FACTORY, 232							
3RD STREET # A108 - BROOKLYN, NY							
11215	11-3639386	509(A)(1)	10,000.	0.			B99 EDUCATION N.E.C.*
PENNSYLVANIA STATE UNIVERSITY			,				
OFFICE OF ANNUAL GIVING, 2583							
GATEWAY DRIVE, BRISTOL PLACE ONE,							B40 HIGHER ED
SUITE 200 -	24-6000376	170(C)(1)	10,000.	0.			INSTITUTIONS
RHODE ISLAND PHILHARMONIC							
ORCHESTRA & MUSIC SCHOOL - 667							
WATERMAN AVE EAST PROVIDENCE,							A25 ARTS
RI 02914	05-0267451	509(A)(2)	10,000.	0.			EDUCATION/SCHOOLS
ST. ANTHONY CATHOLIC CHURCH							
1256 ST. ANTHONY CHURCH RD							
CLARKSON, KY 42726	61-0598513	509(A)(1)	10,000.	0.			X22 ROMAN CATHOLIC
				•			U50 BIOLOGICAL LIFE
TALL TIMBERS RESEARCH INC.							SCIENCE RESEARCH
13093 HENRY BEADEL DRIVE							(INCLUDES MARINE BIOLOG
TALLAHASSEE, FL 32312	59-0952956	509(A)(1)	10,000.	0.			PHYSIOLOGY BIOCHEM
				_			
THE MACK FAMILY FOUNDATION, INC.							DOO HIMAN GERNIAGE
59 CAVALIER BOUVELARD, SUITE 310	01 0500505	F00/3\/1\	10.000	2			P20 HUMAN SERVICE
FLORENCE,, KY 41042	81-2583507	D03(Y)(T)	10,000.	0.		1	ORGANIZATIONS

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Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	T
(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
USA FOR UNHCR THE UN REFUGEE							
AGENCY - 1310 L STREET NW, SUITE							Q42 UNITED NATIONS
450 - WASHINGTON, DC 20005	52-1662800	509(A)(1)	10,000.	0.			ASSOCIATION
VETERANS OF FOREIGN WARS							
FOUNDATION - 406 W. 34TH STREET							W30 MILITARY/VETERANS'
SUITE 920 - KANSAS CITY, MO 64111	43-1758998	509(A)(1)	10,000.	0.			ORGANIZATIONS
WESTERN KENTUCKY REFUGEE MUTUAL			,				
ASSISTANCE SOCIETY INC - 806							
KENTON ST - BOWLING GREEN, KY							P84 ETHNIC/IMMIGRANT
42101	61-0994341	509(A)(1)	10,000.	0.			SERVICES
WORLD FOOD PROGRAM USA							Q30 INTERNATIONAL
1725 EYE STREET NW SUITE 510	12 2042425	E00/33/43	10.000				DEVELOPMENT RELIEF
WASHINGTON, DC 20006	13-3843435	509(A)(1)	10,000.	0.			SERVICES
FIRST LUTHERAN CHURCH							
417 E. BROADWAY							
LOUISVILLE, KY 40202	61-0447244	RELIGIOUS ORGANI	9,769.	0.			X20 CHRISTIAN
			-				
JEFFERSON COUNTY PUBLIC SCHOOLS							
3332 NEWBURG ROAD							B EDUCATIONAL
LOUISVILLE, KY 40218	61-6001316	170(C)(1)	9,500.	0.			INSTITUTIONS
KENTUCKY HARVEST							
7705 NATIONAL TURNPIKE	61 1125260	E00/3\/1\	0 470	0			WAA GUDTGMTAN
LOUISVILLE, KY 40214	61-1135269	509(A)(1)	9,479.	0.			X20 CHRISTIAN
GOODWILL INDUSTRIES OF KENTUCKY							
1325 SOUTH FOURTH STREET							
LOUISVILLE, KY 40208	61-0475284	509(A)(1)	9,471.	0.			J32 GOODWILL INDUSTRIES
NATIONAL COUNCIL OF JEWISH WOMEN		,	- , - · <u>-</u> ·				
INCORPORATED - MID-CITY MALL LOWER							
LEVEL, 1250 BARDSTOWN ROAD STE. 26							
- LOUISVILLE, KY 40204	61-0548562	509(A)(1)	9,450.	0.			P33 CHILD DAY CARE

LOUISVILLE, INC. 31-0997017

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	ırt II.)	<u> </u>
(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
WOUNDED WARRIOR PROJECT PO BOX 758516 TOPEKA, KS 66675-8517	20-2370934	509(A)(1)	9,350.	0.			W30 MILITARY/VETERANS' ORGANIZATIONS
VETERAN'S CLUB INC 4218 SHELBYVILLE ROAD LOUISVILLE, KY 40207	83-3873211	509(A)(1)	9,250.	0.			W99 PUBLIC SOCIETY BENEFIT-MULTIPURPOSE & OTHER N.E.C.*
ALLEY CAT ADVOCATES 3524 NEWBURG RD LOUISVILLE, KY 40218	61-1343210	509(A)(1)	9,229.	0.			D20 ANIMAL PROTECTION AND WELFARE (INCLUDES HUMANE SOCIETIES AND SPCAS)
HISTORIC HOMES FOUNDATION INC. 3110 LEXINGTON ROAD LOUISVILLE, KY 40206	61-0549274	509(A)(2)	9,170.	0.			A80 HISTORICAL SOCIETIES AND RELATED ACTIVITIES
HUMANE SOCIETY OF OLDHAM COUNTY PO BOX 727 LAGRANGE, KY 40031	61-1166840	509(A)(1)	9,129.	0.			D20 ANIMAL PROTECTION AND WELFARE (INCLUDES HUMANE SOCIETIES AND SPCAS)
CHRISTIAN CARE COMMUNITIES 12710 TOWNEPARK WAY #1000 LOUISVILLE, KY 40243	61-0445828	509(A)(1)	9,126.	0.			E91 NURSING CONVALESCENT (GERIATRIC AND NURSING)
REFUGE LOUISVILLE INC. 1941 BISHOP LN, STE 804 LOUISVILLE, KY 40218-1965	45-3161988	509(A)(1)	9,000.	0.			X20 CHRISTIAN
TEACHING TRUTH INTERNATIONAL P.O. BOX 22331 ROBBINSDALE, MN 55422	26-1480730	509(A)(1)	9,000.	0.			X20 CHRISTIAN
YMCA OF OWENSBORO / DAVIESS COUNTY 900 KENTUCKY PARKWAY OWENSBORO, KY 42301	61-0561344	509(A)(2)	9,000.	0.			P27 YMCA YWCA YWHA YMHA

Schedule I (Form 990)

Schedule I (Form 990) LOUISVILLE, II	NC.						31-0997017 Page 1
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	overnments (Scho	edule I (Form 990), Pa	rt II.)	T
(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
GOODFELLOWS CLUB OF OWENSBORO							
KENTUCKY INC 401 FREDERICA							
STREET # B-203 - OWENSBORO, KY							P30 CHILDREN'S AND YOUTH
42301	61-1155143	509(A)(2)	8,982.	0.			SERVICES
INDIANA UNIVERSITY - BLOOMINGTON OFFICE OF THE BURSAR, POPLARS							
BUILDING - BLOOMINGTON, IN	25 6004652	500/53/03	0.750				B43 UNIVERSITY OR
47405-3085	35-6001673	509(A)(2)	8,750.	0.			TECHNOLOGICAL
THE FOOD LITERACY PROJECT AT OXMOOR FARM INC 9001 LIMEHOUSE							K AGRICULTURE FOOD
LANE - LOUISVILLE, KY 40220	20-5014424	509(A)(1)	8,731.	0.			NUTRITION
AMPLIFY LOUISVILLE INC 900 E MAIN ST FL 2 LOUISVILLE, KY 40206	83-4402051	509(A)(2)	8,500.	0.			S30 ECONOMIC DEVELOPMENT
COMMUNITY CONNECTIONS GROUP INC. 6606 FERNBUSH DR							
LOUISVILLE, KY 40228	82-1363804	509(A)(1)	8,500.	0.			Z UNKNOWN
KENTUCKY HEALTH JUSTICE NETWORK PO BOX 4761 LOUISVILLE, KY 40204	27-1246514	509(A)(1)	8,386.	0.			E40 REPRODUCTIVE HEALTH CARE FACILITIES AND ALLIED SERVICES
HOUSTELL, RI 40204	27 1240314	505(11)(1)	0,300.	<u> </u>			I DINVICES
MOLO VILLAGE CDC CO. P.O. BOX 2846							P20 HUMAN SERVICE
LOUISVILLE, KY 40201	27-5347893	509(A)(1)	8,366.	0.			ORGANIZATIONS
KIDS CANCER ALLIANCE INC. P.O. BOX 24337 LOUISVILLE, KY 40224	61-1256743		8,095.	0.			E86 PATIENT SERVICES-ENTERTAINMENT RECREATION
GRAND BLANC HIGH SCHOOL C/O TAMMY MCBRIDE, 12500 HOLLY RD GRAND BLANC, MI 48439	38-6001238	170(C)(1)	8,000.	0.			B EDUCATIONAL INSTITUTIONS

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Schedule I (Form 990)

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	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 non-cash assistance	(h) Purpose of grant or assistance
SPARC HOPE							
11921 BRINLEY AVE STE 101							
LOUISVILLE, KY 40243	32-0049180	509(A)(1)	7,904.	0.			P40 FAMILY SERVICES
SALVATION ARMY- OWENSBORO							
215 SOUTH EWING RD., PO BOX 943							
OWENSBORO, KY 42302-2943	58-0660607	509(A)(1)	7,900.	0.			P24 SALVATION ARMY
HIGHLANDS COMMUNITY MINISTRIES							
1228 E BRECKINRIDGE STREET							
LOUISVILLE, KY 40204	61-0708776	509(A)(1)	7,846.	0.			X21 PROTESTANT
			, -				
BRIGHTSIDE FOUNDATION							
PO BOX 70362							C50 ENVIRONMENTAL
LOUISVILLE, KY 40270	45-0948896	509(A)(1)	7,754.	0.			BEAUTIFICATION
SHAMROCK FOUNDATION INC.							
PO BOX 24033							
LOUISVILLE, KY 40224	61-1244026	509(A)(2)	7,722.	0.			D ANIMAL RELATED
DECODE PROJECT INC							
2509 PORTLAND AVENUE							B92 REMEDIAL READING
LOUISVILLE, KY 40212	83-2280075	509(A)(2)	7,711.	0.			READING ENCOURAGEMENT
THE VILLAGE SCHOOL OF LOUISVILLE							
INC - 1649 COWLING AVE #104 -	85-2153218	E00/3\/1\	7 630	_			ZOO IINKNOMA
LOUISVILLE, KY 40205 RIGHT TO LIFE EDUCATIONAL	05-2153218	5U9(A)(I)	7,629.	0.			Z99 UNKNOWN
FOUNDATION OF KENTUCKY - 161 ST.							
MATTHEWS AVE., STE. 2 -							
LOUISVILLE, KY 40207-3145	31-0955315	509(A)(1)	7,600.	0.			R62 RIGHT TO LIFE
	1 22 2333313	/\-/	,,,,,,,,,				
AMERICAN UNIVERSITY							
4400 MASSACHUSETTS AVENUE							B EDUCATIONAL
WASHINGTON, DC 20016	53-0196549	509(A)(1)	7,500.	0.			INSTITUTIONS

LOUISVILLE, INC. 31-0997017 Schedule I (Form 990)

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt 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
ANN & ROBERT H LURIE CHILDRENS							
HOSPITAL OF CHICAGO FOUNDATION -							
DEPARTMENT 4586 - CAROL STREAM, IL	26 225 5006	500/53/43					E11 SINGLE ORGANIZATION
50122-4586	36-3357006	509(A)(1)	7,500.	0.			SUPPORT
DELAWARE STATE UNIVERSITY							
L200 N. DUPONT HWY							B43 UNIVERSITY OR
DOVER, DE 19901	51-0305893	509(A)(1)	7,500.	0.			TECHNOLOGICAL
·			<u> </u>				
FORECAST PUBLIC ARTWORKS							
2300 MYRTLE AVE, SUITE 160							A40 VISUAL ARTS
SAINT PAUL, MI 55114	41-1361351	509(A)(1)	7,500.	0.			ORGANIZATIONS
FRIENDS OF THE GROVELAND LIBRARY							
PO BOX 43				_			B70 LIBRARIES LIBRARY
GROVELAND, CA 95321	77-0444509	509(A)(1)	7,500.	0.			SCIENCE
HUNTINGTON UNIVERSITY							
FINANCIAL AID OFFICE, 2303 COLLEGE							B EDUCATIONAL
HUNTINGTON, IN 46750	35-0868101	509(A)(1)	7,500.	0.			INSTITUTIONS
10/11/10/10/10	33 0000101	505(11)(1)	7,300.				INSTITUTIONS
OKLAHOMA CITY UNIVERSITY							
2501 N. BLACKWELDER AVENUE							B EDUCATIONAL
OKLAHOMA CITY, OK 73106	73-0579265	509(A)(1)	7,500.	0.			INSTITUTIONS
PURDUE UNIVERSITY FORT WAYNE							
OFFICE OF THE BURSAR, 2101 E.							
COLISEUN BLVD FT. WAYNE, IN							B EDUCATIONAL
16805	35-6001673	170(C)(1)	7,500.	0.			INSTITUTIONS
RUTGERS UNIVERSITY							
4 HUNTINGTON ST.							B EDUCATIONAL
NEW BRUNSWICK, NJ 08901	23-7318742	509(A)(1)	7,500.	0.			INSTITUTIONS
TRINE UNIVERSITY							
ONE UNIVERSITY AVENUE							B43 UNIVERSITY OR
	35-0715530	509(3)(1)	7,500.	0.			TECHNOLOGICAL
ANGOLA, IN 46703	22-0113330	Po3(A/(T/	1,500.	U .			L ECUMOROGICAL

Schedule I (Form 990)

LOUISVILLE, INC.

31-0997017

Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	rt II.)	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 non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF EVANSVILLE							
1800 LINCOLN AVENUE							B40 HIGHER ED
EVANSVILLE, IN 47722	35-0868074	509(A)(1)	7,500.	0.			INSTITUTIONS
UNIVERSITY OF MICHIGAN-DEARBORN			,,,,,,				
UNIVERSITY CENTER, RICHARD DR							
#1183, ATTN:FINANCIAL AID OFFICE -							B EDUCATIONAL
DEARBORN, M	38-6006309	509(A)(1)	7,500.	0.			INSTITUTIONS
UNIVERSITY OF NORTH CAROLINA AT							
CHARLOTTE - 380 CONE CENTER, 9201							
UNIVERSITY CITY BLVD - CHARLOTTE,							B EDUCATIONAL
NC 28223-0001	56-2180508	509(A)(1)	7,500.	0.			INSTITUTIONS
UNIVERSITY OF WISCONSIN AT OSHKOSH							
OFFICE OF FINANCIAL AID, 800 ALGOMA		500/53/43					B EDUCATIONAL
OSHKOSH, WI 54901	39-6076856	509(A)(1)	7,500.	0.			INSTITUTIONS
WEST SHORE EVANGELICAL FREE CHURCH							
1345 WILLIAMS GROVE RD							
MECHANICSBURG, PA 17055	23-1970373	509(A)(1)	7,500.	0.			X21 PROTESTANT
memmirebbone, in 17000	23 2370373	505(11)(1)	,,500.	•			mar ricerasium;
CRITICALLY LOVED INC.							
PO BOX 43047							P30 CHILDREN'S AND YOUTH
LOUISVILLE, KY 40253	81-5273913	509(A)(1)	7,500.	0.			SERVICES
FERN CREEK HIGH SCHOOL ALUMNI							
ASSOCIATION - PO BOX 91266 -							
LOUISVILLE, KY 40291	31-1607235	509(A)(2)	7,222.	0.			B84 ALUMNI ASSOCIATIONS
ELDERSERVE, INC.							
631 SOUTH 28TH STREET							P81 SENIOR
LOUISVILLE, KY 40211	61-6024140	509(A)(1)	7,202.	0.			CENTERS/SERVICES
CARRIOL IS DELINE SERVICES							
CATHOLIC RELIEF SERVICES							M20 DIGAGMED DDEDADEDAGG
P.O. BOX 17090	13_5562422	509/3\/1\	7 000	0.			M20 DISASTER PREPAREDNESS
BALTIMORE, MD 21297-0303	13-5563422	D03(A)(T)	7,000.	0.			AND RELIEF SERVICE

Schedule I (Form 990)

LOUISVILLE, INC. Schedule I (Form 990) 31-0997017

Part II Continuation of Grants and Other I	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt 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
PINE MOUNTAIN SETTLEMENT SCHOOL							C60 ENVIRONMENTAL
INC 36 HIGHWAY 510 - BLEDSOE,							EDUCATION AND OUTDOOR
KY 40810	61-0444789	509/31/11	7,000.	0.			SURVIVAL PROGRAMS
UNIVERSITY OF ILLINOIS URBANA -	01 0444703	505(R)(1)	7,000.	0.			DORVIVAL TROGRAMS
CHAMPAIGN - OFFICE OF STUDENT							
FINANCIAL AID, 620 E. JOHN STREET							B EDUCATIONAL
·	37-6000511	E00/3\/1\	7 000	0.			
- CHAMPAIGN, IL 61820	37-6000511	509(A)(I)	7,000.	0.			INSTITUTIONS
PROTECTIVE LIFE INSURANCE COMPANY							
PO BOX 2224							LIFE INSURANCE POLICY
	63-0169720	EOD DDOETM	6 006	0.			PREMIUMS
BIRMINGHAM, AL 35246-0030	63-0169720	FOR PROFIT	6,986.	0.			PREMIUMS
GCCS EDUCATIONAL FOUNDATION							
2112 UTICA SELLERSBURG ROAD							B11 SINGLE ORGANIZATION
	35-2077348	E00/3\/1\	6,914.	0.			SUPPORT
JEFFERSONVILLE, IN 47130-8506	35-2077346	509(A)(1)	0,914.	0.			SUPFORT
NEW ALBANY FLOYD COUNTY EDUCATION							
FOUNDATION - 2813 GRANT LINE ROAD							B11 SINGLE ORGANIZATION
- NEW ALBANY, IN 47150	20-2552199	509(A)(3) TYPE I	6,879.	0.			SUPPORT
UNIVERSITY OF CINCINNATI	20 2332133	303(R)(3) 111E 1	0,075.	0.			BOTTORT
STUDENT FINANCIAL AID OFFICE, P.O.							
•							B EDUCATIONAL
BOX 210125 - CINCINNATI, OH	31-0896555	170/01/11	6,850.	0.			
45221-0125	31-0030333	1/0(C)(1)	6,650.	0.			INSTITUTIONS
DREAMS WITH WINGS							P99 HUMAN
1579 BARDSTOWN ROAD							SERVICES-MULTIPURPOSE &
	61 1271540	E00/3\/2\	6 926	0			
LOUISVILLE, KY 40205	61-1371540	509(A)(Z)	6,826.	0.			OTHER N.E.C.*
ACTA INCOTOTION INC							
ASIA INSTITUTE, INC. CRANE HOUSE, 1244 S. 3RD ST.							A23 CULTURAL/ETHNIC
•	61-1107169	509/31/21	6 700	0.			AWARENESS
LOUISVILLE, KY 40203	01-110/109	509(A)(Z)	6,799.	U .			MUVENESS
SAMARITAN'S PURSE							
PO BOX 3000							
BOONE NC 28607	58-1437002	509(3)(1)	6,759.	0.			X20 CHRISTIAN
DOOME, NC ZOOU!	30-143/002	202(A/(I/	0,759.	٠.			MEO CHUTOITUM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (c) IRC section (f) Method of (a) Name and address of (b) EIN (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) JACOBS WELL 8757 RUFING RD T12 FUNDRAISING AND/OR GREENVILLE, IN 47124 20-5389152 509(A)(1) 6,752 0. FUND DISTRIBUTION HOSEAS HOUSE INC PO BOX 991492 P43 FAMILY VIOLENCE LOUISVILLE, KY 40269 20-3161219 509(A)(1) 6,697 0 SHELTERS AND SERVICES ST. FRANCIS IN THE FIELDS EPISCOPAL CHURCH - 6710 WOLF PEN BRANCH ROAD - HARRODS CREEK, KY X RELIGION SPIRITUAL 40027 61-0444805 RELIGIOUS ORGANI 6,610 0. DEVELOPMENT TYSON'S CHANCE ANIMAL FOUNDATION D20 ANIMAL PROTECTION AND PO BOX 1347 WELFARE (INCLUDES HUMANE 27-4973867 509(A)(1) SHELBYVILLE, KY 40066 0 SOCIETIES AND SPCAS) 6,559. KENTUCKY STATE UNIVERSITY STUDENT FINANCIAL AID OFFICE, 400 EAST MAIN ST. - FRANKFORT, KY B EDUCATIONAL 61-1099712 170(C)(1) 0. INSTITUTIONS 40601 6,500. SENECA PAST AND PRESENT P O BOX 20856 LOUISVILLE, KY 40250 27-2592737 509(A)(2) 0. B84 ALUMNI ASSOCIATIONS 6,500 SOWING SEEDS WITH FAITH C/O DA'MARRION FLEMING, P.O. BOX 16 X RELIGION SPIRITUAL LOUISVILLE, KY 40256 DEVELOPMENT 81-4862518 509(A)(2) 6 500. 0. T50 MUSLIM AMERICANS FOR COMPASSION PHILANTHROPY/CHARITY/VOLUN TARISM PROMOTION 2107 TWIN HILL ROAD LOUISVILLE, KY 40207 46-4191281 509(A)(1) 6,481. 0. (GENERAL) T70 FUNDRAISING HEART OF KENTUCKY UNITED WAY ORGANIZATIONS THAT CROSS CATEGORIES (INCLUDES 118 NORTH THIRD ST. DANVILLE, KY 40422 23-7166092 509(A)(1) 6 390. 0. COMMUNITY FUNDS)

Schedule I (Form 990)

LOUISVILLE, INC. 31-0997017 Schedule I (Form 990)

Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	art 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
ACT LEADERSHIP CORPORATION							
1626 BELLE VIEW BLVD SUITE 7323							TUITION PAYMENT FOR ALDEN
ALEXANDRIA, VA 22307	46-3561915	FOR PROFIT	6,350.	0.			FELLOWSHIP 2019
THE MINISTRY, VII 22307	40 3301313	TON TROTTI	0,330.	0.			
NORTH CAROLINA COMMUNITY							T PHILANTHROPY
FOUNDATION - 3737 GLENWOOD AVENUE,							VOLUNTARISM AND
SUITE 460 - RALEIGH, NC 27612	58-1661700	509(A)(1)	6,344.	0.			GRANTMAKING
	33 2332733		3,011.				
SHELBY COUNTY COMMUNITY THEATRE							
INC 801 WEST MAIN STREET -							
SHELBYVILLE, KY 40065	31-0916464	509(A)(1)	6,329.	0.			A65 THEATER
HOPE SOUTHERN INDIANA INC.		, , , , , , , , ,	,,,,,,,				
BROWN-STARKS NEIGHBORHOOD PLACE,							
1200 BONO ROAD - NEW ALBANY, IN							
47150	35-1128300	509(A)(1)	6,302.	0.			P40 FAMILY SERVICES
			,,,,,,				
FRANCISCAN SHELTER HOUSE							P99 HUMAN
748 SOUTH PRESTON ST.							SERVICES-MULTIPURPOSE &
LOUISVILLE, KY 40203	61-1081045	509(A)(1)	6,037.	0.			OTHER N.E.C.*
ALSAC ST. JUDE CHILDREN'S RESEARCH		, , , , , , , , ,	,,,,,,,				
HOSPITAL - LOUISVILLE - 304							
WHITTINGTON PARKWAY SUITE 102 -							
LOUISVILLE, KY 40222	35-1044585	509(A)(1)	6,000.	0.			E24 HOSPITAL (SPECIALTY)
			-,				(========
EPISCOPAL DIOCESE OF KENTUCKY							
425 S. 2ND ST. #200							X RELIGION SPIRITUAL
LOUISVILLE, KY 40202	61-0445831	RELIGIOUS ORGANI	6,000.	0.			DEVELOPMENT
,			,,,,,,,				
LOUISVILLE MALE HIGH SCHOOL							
4409 PRESTON HIGHWAY							
LOUISVILLE, KY 40213	61-6001316	170(C)(1)	6,000.	0.			B25 SECONDARY/HIGH SCHOOL
		, , _ ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
NORTHRIDGE PRESBYTERIAN CHURCH							
6920 BOB-O-LINK DR.							X RELIGION SPIRITUAL
DALLAS, TX 75214	75-0846305	509(A)(1)	6,000.	0.			DEVELOPMENT

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 (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) OWENSBORO CHRISTIAN CHURCH 2818 NEW HARTFORD RD. X RELIGION SPIRITUAL DEVELOPMENT OWENSBORO, KY 42303 61-0862202 RELIGIOUS ORGANI 6,000 0. SACRED HEART FOUNDATION PO BOX 2700 E11 SINGLE ORGANIZATION PENSACOLA, FL 32513-2700 59-2436597 509(A)(1) 6,000 0 SUPPORT SIGNS & WONDERS MINISTRIES INC. PO BOX 19041 X RELIGION SPIRITUAL LOUISVILLE, KY 40259 26-1345716 RELIGIOUS ORGANI 6,000 0. DEVELOPMENT TROY UNIVERSITY OFFICE OF FINANCIAL AID, 134 ADAMS ADMINISTRATION BUILDING - TROY, AL B EDUCATIONAL 63-6001102 170(C)(1) 36082 6,000. 0 INSTITUTIONS T70 FUNDRAISING UNITED WAY OF CENTRAL KENTUCKY ORGANIZATIONS THAT CROSS 604 NORTH MAIN ST CATEGORIES (INCLUDES 61-1397560 509(A)(1) ELIZABETHTOWN, KY 42701 0. COMMUNITY FUNDS) 6,000 UNIVERSITY OF GEORGIA OFFICE OF STUDENT FINANCIAL AID 220 HOLMES/ HUNTER ACADEMIC BLDG B EDUCATIONAL - ATHENS 58-6001998 170(C)(1) 0. INSTITUTIONS 6,000 WESTPORT ROAD BAPTIST CHURCH 9705 WESTPORT ROAD 61-0655593 509(A)(1) LOUISVILLE, KY 40241 6 000 0. X20 CHRISTIAN CREATIVE AGENTS OF CHANGE FOUNDATION D/B/A IDEAS XLAB - 204 S FLOYD ST #3 - LOUISVILLE, KY A20 ARTS CULTURAL 40202 46-3469821 509(A)(2) 5,961. 0. ORGANIZATIONS-MULTIPURPOSE B28 SPECIAL ED THE DE PAUL SCHOOL INSTITUTIONS/ SCHOOLS FOR VISUALLY OR HEARING 1925 DUKER AVENUE LOUISVILLE, KY 40205 61-0711082 509(A)(1) 5 919 0. IMPAIRED LEARNING

Schedule I (Form 990)

Schedule I (Form 990) LOUISVILLE, INC.

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (f) Method of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV. assistance appraisal, other) LITTLE SISTERS OF THE POOR HOME FOR THE AGED OF LOUISVILLE 15 AUDUBON PLAZA DRIVE -LOUISVILLE, KY 402 61-0487466 509(A)(1) 5,752 0. X22 ROMAN CATHOLIC SICKLE CELL ASSOCIATION OF KENTUCKIANA - 201 EAST JEFFERSON STREET, STE, 120, MED 3 CENTER G80 SPECIFICALLY NAMED BLDG - LOUISVILLE, KY 40202 61-1383380 509(A)(1) 5,736 0 DISEASES YOUNG ADULT DEVELOPMENT IN ACTION INC. AKA YOUTHBUILD - AKA YOUTHBUILD, PO BOX 638 -P30 CHILDREN'S AND YOUTH LOUISVILLE, KY 40201 61-1374470 509(A)(1) 5,686 0. SERVICES VANDERBILT UNIVERSITY GIFT AND DONOR SERVICES, PMB 407727 B43 UNIVERSITY OR NASHVILLE, TN 37240-7727 62-0476822 509(A)(1) 5,600. 0 TECHNOLOGICAL BOULWARE MISSION INC. 609 WING AVE. P28 NEIGHBORHOOD CENTER 61-0486968 509(A)(1) OWENSBORO, KY 42303 0. SETTLEMENT HOUSE 5,553. ACLU FOUNDATION, INC. 125 BROAD STREET 18TH FLOOR R60 CIVIL LIBERTIES NEW YORK NY 10004-2400 13-6213516 509(A)(1) 0. ADVOCACY 5,523 CHAUTAUOUA INSTITUTION P.O. BOX 28 A20 ARTS CULTURAL 16-0758844 509(A)(2) CHAUTAUOUA NY 14722 5 500 0. ORGANIZATIONS-MULTIPURPOSE J20 EMPLOYMENT JUBILEE JOBS OF LEXINGTON INC. PROCUREMENT ASSISTANCE 1450 N. BROADWAY LEXINGTON, KY 40505 27-1058855 509(A)(1) 5,500. 0. AND JOB TRAINING NATIONAL MULTIPLE SCLEROSIS SOCIETY - PO BOX 91891 -G50 NERVE MUSCLE AND BONE DISEASES WASHINGTON, DC 20090 13-5661935 509(A)(1) 5 500. 0.

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31-0997017

LOUISVILLE, INC. 31-0997017

Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (SCHE	edule i (Form 990), Pa	rt II.) T	T
(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
AMARITANS INC - BOSTON							
41 WEST STREET 4TH FLOOR							P20 HUMAN SERVICE
BOSTON, MA 02111	04-2643466	509(A)(1)	5,500.	0.			ORGANIZATIONS
,			1,7,7,7				
KIWANIS CLUB OF LOUISVILLE							
FOUNDATION INC PO BOX 32243 -							
LOUISVILLE, KY 40232	20-1531707	509(A)(1)	5,489.	0.			T30 PUBLIC FOUNDATIONS
SOS INTERNATIONAL INC.							Q INTERNATIONAL FOREIGN
1500 ARLINGTON AVE	_						AFFAIRS AND NATIONAL
LOUISVILLE, KY 40206	27-2624272	509(A)(2)	5,479.	0.			SECURITY
GENNEDOTNE GONGULETING II G							
STANDPOINT CONSULTING, LLC							
1934 HIGBEE AVENUE	04 2622405	TOD DDOELT	F 460	0			ALDEN BELLONG BYDENGE
MEMPHIS, TN 38104	84-2623495	FOR PROFIT	5,460.	0.			ALDEN FELLOWS EXPENSE
SHAKERTOWN AT PLEASANT HILL							
KENTUCKY INC 3501 LEXINGTON							
ROAD - HARRODSBURG, KY 40330-8846	61-0592561	509(A)(1)	5,375.	0.			A54 HISTORY MUSEUMS
MINICODE DONG, NI 40330 0040	01 0332301	303(11)(1)	3,373.	0.			1134 HIDIONI MODEOND
AMERICAN LUNG ASSOCIATION -							
WISCONSIN - 13100 WEST LISBON RD,							
SUITE 700 - BROOKFIELD, WI 53005	13-1632524	509(A)(1)	5,317.	0.			G45 LUNG
,			,				
SISTERS FOR LIFE EDUCATION FUND							
INC - P.O. BOX 32534 - LOUISVILLE,							
KY 40232	33-1061393	509(A)(1)	5,267.	0.			R62 RIGHT TO LIFE
FLIGHT CLUB 502							
PO BOX 35369							050 YOUTH DEVELOPMENT
LOUISVILLE, KY 40232	81-2565221	509(A)(2)	5,250.	0.			PROGRAMS
FOUNDATION FOR EXCELLENCE							
OWENSBORO INDEPENDENT SCHOOLS -							
450 GRIFFITH AVE - OWENSBORO, KY							
42301	61-1349137	509(A)(1)	5,250.	0.			B99 EDUCATION N.E.C.*

Schedule I (Form 990)

Page 1

Schedule I (Form 990) LOUISVILLE, INC.

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt 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
LEUKEMIA & LYMPHOMA SOCIETY INC.							
P.O. BOX 772373							
DETROIT, MI 48277-2373	13-5644916	509(A)(1)	5,250.	0.			G30 CANCER
UNIVERSITY OF ROCHESTER			,				
UR GIFT AND DONOR SERVICES, 300							
EAST RIVER ROAD PO BOX 270032 -							B EDUCATIONAL
ROCHESTER, N	16-0743209	509(A)(1)	5,250.	0.			INSTITUTIONS
YOUTH GOLF COALITION INC.			·				
DBA THE FIRST TEE OF LOUISVILLE,							
460 NORTHWESTERN PKWY -							N6A GOLF (COUNTRY CLUBS
LOUISVILLE, KY 4021	20-0977578	509(A)(1)	5,250.	0.			USE N50)
THE GRACE TRUST INC.							
PO BOX 64528							
COLORADO SPRINGS, CO 80962-4528	35-0992713	509(A)(1)	5,200.	0.			X20 CHRISTIAN
BEREA COLLEGE							
CPO 2216				_			B40 HIGHER ED
BEREA, KY 40404	61-0444650	509(A)(1)	5,155.	0.			INSTITUTIONS
VINTAGE FIRE MUSEUM							
723 SPRING STREET							A50 MUSEUMS & MUSEUM
JEFFERSONVILLE, IN 47130	27-0506646	509(3)(1)	5,138.	0.			ACTIVITIES
BITTERSONVILLE, IN 4/130	27 0300040	303(11)(1)	3,130.	••			liciiviiiib
LOUISVILLE YOUTH PHILANTHROPY							
COUNCIL INC - 9523 US HWY 42,							051 COMMUNITY SERVICE
SUITE 74 - PROSPECT, KY 40059	87-2576565	509(A)(1)	5,106.	0.			CLUBS YOUTH DEVELOPMENT
,			, -				T70 FUNDRAISING
UNITED WAY OF THE OHIO VALLEY							ORGANIZATIONS THAT CROSS
403 PARK PLAZA DRIVE, P.O. BOX 705							CATEGORIES (INCLUDES
OWENSBORO, KY 42302	61-0435444	509(A)(1)	5,053.	0.			COMMUNITY FUNDS)
·							
VA MEDICAL CENTER							
800 ZORN AVENUE							
LOUISVILLE, KY 40206	61-0990338	170(C)(1)	5,029.	0.			1 GOVERNMENT ENTITY

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Schedule I (Form 990) 2021

LOUISVILLE, INC.

31-0997017

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oncash assista	nce

Part III can be duplicated it 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
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	dditional information.	
PART I, LINE 2:					
THE ORGANIZATION USES GUIDESTAR.ORG TO CONFIRM THAT	THE RECIPIE	ENT			
ORGANIZATIONS ARE IN GOOD STANDING PRIOR TO MAKING	THE DONATION	I. WHEN THE			
DONATION IS SENT THE FOLLOWING INFORMATION IS PROVI	IDED TO EACH	GRANT			
RECIPIENT:					
"BY DEPOSITING THIS CHECK, YOUR ORGANIZATION CERTIF	FIES THAT NO	INDIVIDUALS			
OR ENTITIES CONNECTED WITH THE DONOR RECEIVED ANY					
OR OTHER SERVICES (E.G. EVENT TICKETS, MEMBERSHIP I	FEES, TUITION	, OR ITEMS			

SCHEDULE J (Form 990)

Compensation Information

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.

Open to Public

OMB No. 1545-0047

Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

THE COMMUNITY FOUNDATION OF LOUISVILLE, INC.

Employer identification number 31-0997017

Pa	Part I Questions Regarding Compensation			
			Yes	No
1 a	a 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.			
	First-class or charter travel Housing allowance or residence for	personal use		
	Travel for companions Payments for business use of perso	nal residence		
	Tax indemnification and gross-up payments Health or social club dues or initiation	on fees		
	Discretionary spending account Personal services (such as maid, ch	auffeur, chef)		
b	b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment of	or		
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all direct	ors,		
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization	ation's		
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related orga	inization to		
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensations	ation 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:			
а	Receive a severance payment or change-of-control payment?	4a	<u> </u>	Х
b	b Participate in or receive payment from a supplemental nonqualified retirement plan?	4b	<u> </u>	Х
С		4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	0 1 504 70 504 74 1504 700 1 1 1 1 1 1 1 1 1			
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5		nsation		
	contingent on the revenues of:	-		х
	a The organization?		+	X
D	b Any related organization?	5b		Α
6	If "Yes" on line 5a or 5b, describe in Part III.	unaction		
6		risation		
_	contingent on the net earnings of:	Go		х
	a The organization?		+	X
D	b Any related organization?	6b_		- 41
7	If "Yes" on line 6a or 6b, describe in Part III.	monto		
1	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed pays			x
0	not described on lines 5 and 6? If "Yes," describe in Part III			- 41
8		_		x
9		8		- 21
9	/ II TES OFFINE 6. DIG THE OFGANIZATION AISO TOHOW THE REDUTTABLE DRESUMBTION PROCEDURE GESCRIDEG IN			

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Schedule J (Form 990) 2021

Regulations section 53.4958-6(c)?

LOUISVILLE, INC.

31-0997017

Page 2

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.

		(B) Breakdown of W	/-2 and/or 1099-MIS/ compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) RONALD GALLO	(i)	310,888.	0.	0.	7,936.	341.	319,165.	0.	
PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) MATTHEW L. BACON	(i)	186,028.	0.	0.	5,644.	7,190.	198,862.	0.	
VP & CFO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) TRISHA FINNEGAN	(i)	173,842.	0.	0.	4,688.	8,890.	187,420.	0.	
CHIEF STRATEGY OFFICER (END 6/23/22)		0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
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	(i)								
_	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

LOUISVILLE, INC.

de the information, explanation	n, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990.

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

THE COMMUNITY FOUNDATION OF LOUISVILLE, INC.

Employer identification number 31-0997017

Pai	rt I Types of Property				<u>.</u>			
		(a) Check if applicable	(b) Number of contributions or	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	termin		s
	Ash Marks of side		literns contributed	Form 990, Part VIII, line 1g				
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	305	25,677,854.	FMV			
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	zation durino	the tax vear for co	ontributions				
	for which the organization completed Form 82						0	
	3	,	3				Yes	No
30a	During the year, did the organization receive by	v contributio	n anv property rep	orted in Part I. lines 1 throug	h 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?							х
h	b If "Yes," describe the arrangement in Part II.							
31	Does the examination have a gift apportune policy that requires the review of any popular dead contributions?							
	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash							
JŁU	contributions?		_			32a		x
h	If "Yes," describe in Part II.					OZ.a		
33	If the organization didn't report an amount in c	olumn (c) for	r a type of property	for which column (a) is cho	rkad			
00	describe in Part II.		a type of property	, ioi willon column (a) is chec	mou,			

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

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132142 11-17-21 Schedule M (Form 990) 2021

SCHEDULE 0 (Form 990)

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.

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

THE COMMUNITY FOUNDATION OF LOUISVILLE, INC.

Employer identification number 31-0997017

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:
EACH BOARD MEMBER, VOLUNTEER AND STAFF MEMBER IS REQUESTED TO PROVIDE
ANNUALLY TO THE PRESIDENT OF THE FOUNDATION 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.
BOARD MEMBERS, VOLUNTEERS AND STAFF MEMBERS SHOULD ALSO 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 THE FOUNDATION,
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.

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

Schedule O (Form 990) 2021

10000091

Schedule O (Form 990) 2021 Page 2 THE COMMUNITY FOUNDATION OF Name of the organization **Employer identification number** 31-0997017 LOUISVILLE, INC. FORM 990, PART VI, SECTION B, LINE 15: THE ORGANIZATION HAS A COMPENSATION COMMITTEE THAT ANNUALLY REVIEWS INDUSTRY SURVEY INFORMATION TO DETERMINE A FAIR AND REASONABLE COMPENSATION FOR THE OFFICERS AND KEY EMPLOYEES. THE PRESIDENT'S AND OFFICERS' COMPENSATION IS THEN APPROVED BY THE COMPENSATION COMMITTEE. COMPENSATION FOR ALL EMPLOYEES IS APPROVED BY THE COMPENSATION COMMITTEE AND BOARD. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. FORM 990, PART XII, LINE 2C THE PROCESS HAS NOT CHANGED FROM PRIOR YEAR. THE COMMUNITY FOUNDATION OF LOUISVILLE IS AUDITED AS PART OF THE COMMUNITY FOUNDATION OF LOUISVILLE COMBINED GROUP. THE COMMUNITY FOUNDATION OF LOUISVILLE IS INCLUDED IN THE COMMUNITY FOUNDATION OF LOUISVILLE COMBINED FINANCIAL STATEMENTS. THE ORGANIZATION HAS AN AUDIT COMMITTEE THAT OVERSEES THE AUDIT OF THE FINANCIAL STATMENTS AND THE SELECTION OF THE INDEPENDENT AUDITOR FOR THE COMBINED GROUP.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Name of the organization

THE COMMUNITY FOUNDATION OF LOUISVILLE, INC.

Employer identification number 31-0997017

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (d) (f) (a) (b) (c) (e) Name, address, and EIN (if applicable) Primary activity Legal domicile (state or Total income End-of-year assets Direct controlling of disregarded entity entity foreign country)

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
				501(c)(3))		Yes	No
THE COMMUNITY FOUNDATION OF LOUISVILLE					COMMUNITY		
DEPOSITORY - 31-1140889, 325 W. MAIN STREET,	FACILITATE INDIVIDUAL				FOUNDATION OF		
SUITE 1110, LOUISVILLE, KY 40202	DONORS' CHARITABLE GIVING	KENTUCKY	501(C)(3)	7	LOUISVILLE, INC.	х	
THE COMMUNITY FOUNDATION OF LOUISVILLE					COMMUNITY		
CORPORATE DEPOSITORY - 61-1100993, 325 W.	FACILITATE INDIVIDUAL				FOUNDATION OF		İ
MAIN STREET, SUITE 1110, LOUISVILLE, KY	DONORS' CHARITABLE GIVING	KENTUCKY	501(C)(3)	7	LOUISVILLE, INC.	х	
FELIX E. MARTIN JR. FOUNDATION, INC -	TYPE I SUPPORTING				COMMUNITY		
26-2193468, 325 W. MAIN STREET, SUITE 1110,	ORGANIZATION - MAINTAIN				FOUNDATION OF		İ
LOUISVILLE, KY 40202	AND RECEIVE CONTRIBUTIONS	KENTUCKY	501(C)(3)	11 TYPE I	LOUISVILLE, INC.	х	
THE REAL ESTATE ASSET LEGACY FOUNDATION OF	TYPE I SUPPORTING				COMMUNITY		
KENTUCKY, INC - 26-2417672, 325 W. MAIN	ORGANIZATION - MAINTAIN				FOUNDATION OF		1
STREET, SUITE 1110, LOUISVILLE, KY 40202	AND RECEIVE CONTRIBUTIONS	KENTUCKY	501(C)(3)	11 TYPE I	LOUISVILLE, INC.	х	

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

SEE PART VII FOR CONTINUATIONS

Part II	Continuation of Identification of Related Tax-Exempt Organizations
---------	--

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	organiz	rolled zation?
LOUISVILLE PRESERVATION FUND, INC	TYPE I SUPPORTING			001(0)(0))	COMMUNITY	Yes	No
					FOUNDATION OF		
46-2871014, 323 W. BROADWAY, SUITE 700,	ORGANIZATION - MAINTAIN AND RECEIVE CONTRIBUTIONS	W TO NOTICE WAY	501(C)(3)	11 TYPE I		.,	
LOUISVILLE, KY 40202	AND RECEIVE CONTRIBUTIONS	KENTUCKY	501(C)(3)	II TAPE I	LOUISVILLE, INC.	Х	
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	_						
_	\dashv						

LOUISVILLE, INC.

Page 2

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. Part III

(a) Name, address, and EIN of related organization	(b) Primary activity	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	Disprop	ortionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General of managin partner?	(k) Percentage ownership

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	ent	ction b)(13) rolled tity?
		,						Yes	No

LOUISVILLE, INC.

Page 3

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

Not	te: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
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?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х
	Gift, grant, or capital contribution to related organization(s)	1b	Х	
	Gift, grant, or capital contribution from related organization(s)	1c	Х	<u> </u>
	Loans or loan guarantees to or for related organization(s)	1d		Х
е	Loans or loan guarantees by related organization(s)	1e		Х
f	Dividends from related organization(s)	1f		Х
g	Sale of assets to related organization(s)	1g		Х
h	Purchase of assets from related organization(s)	1h		Х
i	Exchange of assets with related organization(s)	1i		Х
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		Х
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		Х
	Performance of services or membership or fundraising solicitations for related organization(s)	11		Х
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		Х
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Х	<u> </u>
	Sharing of paid employees with related organization(s)	10	Х	<u> </u>
р	Reimbursement paid to related organization(s) for expenses	1 p		Х
q	Reimbursement paid by related organization(s) for expenses	1q		Х
r	Other transfer of cash or property to related organization(s)	1r		Х
s	Other transfer of cash or property from related organization(s)	1s		Х
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) COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY, INC.	С	2,076,594.	FMV
(2) COMMUNITY FOUNDATION OF LOUISVILLE CORPORATE DEPOSITORY, INC.	С	402,258.	FMV
(3) COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY, INC.	В	309,234.	FMV
(4) COMMUNITY FOUNDATION OF LOUISVILLE CORPORATE DEPOSITORY, INC.	В	449,123.	FMV
<u>(5)</u>			
<u>(6)</u>			

LOUISVILLE, INC.

31-0997017

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)	(b)	(c)	(d)	(e) Are all	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners s	ec. Share of	Share of	Dispropor	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera	or Percentage
of entity		(state or foreign	related, unrelated,	partners so 501(c)(3 orgs.?) total	end-of-year	allocations	amount in box 20 of Schedule K-1) manag partne	ownership
		country)	sections 512-514)	Yes N		assets	Yes No	(Form 1065)	Yes	10
			·	1	_		1 1		1	
•										
							+		++	
				+			++		++	
				 			+		++	_
-										
				\vdash	1		++		++	
		1	I			1				

32165 11-17-21 Schedule R (Form 990) 2021

***** THIS IS NOT A FILEABLE COPY *****

IRS e-file Signature Authorization for a Tax Exempt Entity

For calendar year 2021, or fiscal year beginning $\ \ JUL\ 1$, 2021, and ending JUN 30 2022

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Form 8879-TF

▶ Do not send to the IRS. Keep for your records.

► Go to www.irs.gov/Form8879TE for the latest information.

THE COMMUNITY FOUNDATION OF Name of filer EIN or SSN 31-0997017 LOUISVILLE INC MATTHEW L. BACON Name and title of officer or person subject to tax SENIOR VICE PRESIDENT & CFO Part I Type of Return and Return Information Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b,

whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I. **b Total revenue,** if any (Form 990, Part VIII, column (A), line 12) ______ **1b** 1a Form 990 check here **b Total revenue,** if any (Form 990-EZ, line 9) 2a Form 990-EZ check here ... > Form 1120-POL check here b Total tax (Form 1120-POL, line 22) 3a **b Tax based on investment income** (Form 990-PF, Part V, line 5) Form 990-PF check here ... > 4a b Balance due (Form 8868, line 3c) Form 8868 check here 5a **b Total tax** (Form 990-T, Part III, line 4) Form 990-T check here ▶ X 6a 7a Form 4720 check here **b Total tax** (Form 4720, Part III, line 1) 7b 8a Form 5227 check here **b FMV** of assets at end of tax year (Form 5227, Item D) Form 5330 check here b Tax due (Form 5330, Part II, line 19) 9a 9b 10a Form 8038-CP check here **b** Amount of credit payment requested (Form 8038-CP, Part III, line 22) 10b Declaration and Signature Authorization of Officer or Person Subject to Tax Under penalties of perjury, I declare that X I am an officer of the above entity or I I am a person subject to tax with respect to (name and that I have examined a copy of the

2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and 2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information processant to answer inquiries and resolve issues related to the payment. I have selected a payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only X | authorize MCM CPAS & ADVISORS LLP 97017 to enter my PIN Enter five numbers, but ERO firm name do not enter all zeros

as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the

IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Signature of officer or person subject to tax > **** THIS IS NOT A FILEABLE COPY ****

Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

57172704439 Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

Date > 05/09/23 ERO's signature

> **ERO Must Retain This Form - See Instructions** Do Not Submit This Form to the IRS Unless Requested To Do So

LHA For Privacy act and Paperwork Reduction Act Notice, see instructions.

Form **8879-TE** (2021)

10000091

EXTENDED TO MAY 15, 2023 Form 990-T **Exempt Organization Business Income Tax Return** OMB No. 1545-0047 (and proxy tax under section 6033(e)) , and ending JUN 30, 2022 For calendar year 2021 or other tax year beginning $\,JUL\,\,1\,,\,\,2021\,$ ► Go to www.irs.gov/Form990T for instructions and the latest information. epartment of the Treasury ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Internal Revenue Service Name of organization (Check box if name changed and see instructions.) Check hox if address changed. THE COMMUNITY FOUNDATION OF Print LOUISVILLE, INC. 31-0997017 **B** Exempt under section EGroup exemption number (see instructions) X 501(c)(3 or Number, street, and room or suite no. If a P.O. box, see instructions. Type 7220(e) 325 W MAIN ST., 1110 408(e) 408A]530(a) City or town, state or province, country, and ZIP or foreign postal code]529(a) [LOUISVILLE, KY 40202 529A Check box if 629,099,146. C Book value of all assets at end of year ... an amended return. Check organization type ► X 501(c) corporation 501(c) trust 401(a) trust Other trust Claim credit from Form 8941 Check if filing only to Claim a refund shown on Form 2439 Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation Enter the number of attached Schedules A (Form 990-T) During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes If "Yes," enter the name and identifying number of the parent corporation. The books are in care of MATTHEW L BACON 502-585-4649 Telephone number Total Unrelated Business Taxable Income Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) 2 Reserved 2 3 Add lines 1 and 2 3 0. 4 Charitable contributions (see instructions for limitation rules) 4 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3 5 0. Deduction for net operating loss. See instructions 6 6 Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5 1,000. Specific deduction (generally \$1,000, but see instructions for exceptions) 8 8 9 Trusts. Section 199A deduction. See instructions 9 1,000. Total deductions. Add lines 8 and 9 10 10 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, 11 11 Tax Computation Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21) 1 0. Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on

LHA For Paperwork Reduction Act Notice, see instructions.

Tax on noncompliant facility income. See instructions

Total. Add lines 3 through 6 to line 1 or 2, whichever applies

Proxy tax. See instructions

Other tax amounts. See instructions

Tax rate schedule or

Alternative minimum tax (trusts only)

Form 990-T (2021)

<u>2</u> 3

4

5

6

3

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6

Schedule D (Form 1041)

Form 990-T (2021) Page 2 **Tax and Payments** Part III Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) Other credits (see instructions) 1b b General business credit. Attach Form 3800 (see instructions) Credit for prior year minimum tax (attach Form 8801 or 8827) Total credits. Add lines 1a through 1d Subtract line 1e from Part II, line 7 2 Other amounts due. Check if from: Form 4255 Other (attach statement) Total tax. Add lines 2 and 3 (see instructions). Check if includes tax previously deferred under section 1294. Enter tax amount here Current net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 4 5 Payments: A 2020 overpayment credited to 2021 2021 estimated tax payments. Check if section 643(g) election applies Tax deposited with Form 8868 Foreign organizations: Tax paid or withheld at source (see instructions) 6d Backup withholding (see instructions) Credit for small employer health insurance premiums (attach Form 8941) Other credits, adjustments, and payments: Form 2439 Form 4136 Total payments. Add lines 6a through 6g 7 7 Estimated tax penalty (see instructions). Check if Form 2220 is attached 8 8 Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed 9 9 Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid 10 10 Enter the amount of line 10 you want: Credited to 2022 estimated tax Part IV | Statements Regarding Certain Activities and Other Information (see instructions) At any time during the 2021 calendar year, did the organization have an interest in or a signature or other authority No Yes over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country X During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a X If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year 3 20,680. Do not include any post-2017 NOL carryover Enter available pre-2018 NOL carryovers here \$\infty\$ shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 4. Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions **Business Activity Code** \$ \$ Did the organization change its method of accounting? (see instructions) If 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," <u>explain</u> in Part V Supplemental Information Provide the explanation required by Part IV, line 6b. Also, provide any other additional information. See instructions. 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 taxpayer) is based on all information of which preparer has any knowledge. Sign May the IRS discuss this return with Here SENIOR VICE PRESIDENT & CFO the preparer shown below (see Signature of officer Date instructions)? X Yes PTIN Print/Type preparer's name Preparer's signature Date Check self- employed **Paid** THERESA BATLINER, CPA 05/09/23 P00543162 **Preparer**

123711 01-31-22 Form **990-T** (2021)

Use Only

Firm's name MCM CPAS & ADVISORS LLP

462 SOUTH 4TH STREET SUITE 2600

LOUISVILLE, KY 40202

Firm's EIN ▶

27-1235638

(502) 749-1900

FORM 990-T	PRE-201	18 NET OPERATING	LOSS DEDUCTION	STATEMENT 1
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/17	18,076.	0.	18,076.	18,076.
06/30/18	2,604.	0.	2,604.	2,604.
NOL CARRYOV	ER AVAILABLE THIS	YEAR	20,680.	20,680.

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

2021

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990T for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

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

B Employer identification number 31-0997017

C Unrelated business activity code (see instructions) > 523000

D Sequence: 1 of 1

Par	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a	Gross receipts or sales				
b	Less returns and allowances c Balance ▶	1c			
2	Cost of goods sold (Part III, line 8)	2			
3	Gross profit. Subtract line 2 from line 1c	3			
4 a	Capital gain net income (attach Sch D (Form 1041 or Form				
	1120)). See instructions	4a			
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions)	4b			
С	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach				
	statement) STATEMENT 2	5	-93.		-93
6	Rent income (Part IV)	6			
7	Unrelated debt-financed income (Part V)	7			
8	Interest, annuities, royalties, and rents from a controlled				
	organization (Part VI)	8			
9	Investment income of section 501(c)(7), (9), or (17)				
	organizations (Part VII)	9			
0	Exploited exempt activity income (Part VIII)	10			
1	Advertising income (Part IX)	11			
2	Other income (see instructions; attach statement)	12			
3	Total. Combine lines 3 through 12	13	-93.		-93

1	Compensation of officers, directors, and trustees (Part X)			1	
2	Salaries and wages			2	
3	Repairs and maintenance			3	
4	Bad debts			4	
5	Interest (attach statement). See instructions			5	
6	Taxes and licenses			6	
7	Depreciation (attach Form 4562). See instructions				
8				8b	
9	Depletion			9	
10	Contributions to deferred compensation plans			10	
11	Employee benefit programs			11	
12	Excess exempt expenses (Part VIII)			12	
13	Excess readership costs (Part IX)			13	
14	Other deductions (attach statement)			14	
15	Total deductions. Add lines 1 through 14			15	0.
16	Unrelated business income before net operating loss deduction. Subtract line 15 from	n Part	I, line 13,		
	column (C)			16	-93.
17	Deduction for net operating loss. See instructions			17	0.
18	Unrelated business taxable income. Subtract line 17 from line 16			18	-93.
	For December 19 and 19 the Point And Markey and Statement Company			. 1	I. A (F 000 T) 0004

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2021

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Part	III Cost of Goods Sold Enter meth	od of inventory valuation	on 🕨		Page Z
1	Inventory at beginning of year			1	
2	Purchases				
3	Cost of labor				
4	Additional section 263A costs (attach statement)			4	
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				
7	Inventory at end of year			7	
8	Cost of goods sold. Subtract line 7 from line 6. Enter h				
9	Do the rules of section 263A (with respect to property p				Yes No
Part	1 1	•			
1	Description of property (property street address, city, st	ate, ZIP code). Check if	f a dual-use. See instru	uctions.	
	A				
	B				
	D				
		A	В	С	
2	Rent received or accrued				<u>_</u>
a	From personal property (if the percentage of				
-	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)				
С	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				_
3	Total rents received or accrued. Add line 2c columns A	through D. Enter here a	and on Part I, line 6, co	olumn (A)	0.
	Deductions directly connected with the income				
4	in lines 2(a) and 2(b) (attach statement)				
_	T 		0 I (D)		0.
5 Part	Total deductions. Add line 4 columns A through D. Ent V Unrelated Debt-Financed Income (se	ter nere and on Part I, II	ne 6, column (B)	P	· ·
1	Description of debt-financed property (street address, c	,	nack if a dual-use. See	instructions	
•	A	ity, state, Zii Codej. On	ieck ii a duai-use. See	ilistructions.	
	В				
	c \square				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt-financed				
	property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b,				
	columns A through D)				
4	Amount of average acquisition debt on or allocable				
	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
	financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	%
7	Gross income reportable. Multiply line 2 by line 6	Falson L. D. :			0.
8	Total gross income (add line 7, columns A through D).	Enter nere and on Part	i, line /, column (A)	>	U.
0	Allocable deductions Multiply line to builting 6	Γ	I		
9 10	Allocable deductions. Multiply line 3c by line 6 Total allocable deductions. Add line 9, columns A thro	ough D. Enter here and	on Part I line 7 colun	nn (B)	0.
11	Total dividends-received deductions included in line				0.

Sched	ule A (Form 990-T) 2021 VI Interest, Annu	iities R	nvalties and Re	nte fron	n Control	led Or	nanizatione	\$ /00:	o inetruct	ions)		Page 3
rait	micrest, Amit	aidos, m	Julios, and ne		55111101		Exempt Contro	,	e instruct			
	Name of controlle organization	2. Employer identification number	3. Net unrelated income (loss) (see instructions)		4. Total of specified payments made		5. Part of column 4 that is included in the controlling organization's gross income		mn 4 in the aniza-			
(1)							1.01.0	9.0000				
(2)												
(3)												
(4)												
		1	No	, 	Controlled O		ions					
7	7. Taxable Income	ir	Net unrelated acome (loss) e instructions)	9. Total of specified payments made			10. Part of column 9 that is included in the controlling organization's gross income		n the ation's	connect		uctions directly lected with in column 10
(1)												
(2)												
(3)												_
(4)												
Tatala						_	Add colum Enter here line 8, c		Part I,	Ente	er her	emns 6 and 11. e and on Part I, , column (B)
Totals Part		Income	of a Section 50	1(c)(7)_(9) or (17)	► Organ	nization (s	ee instr				0.
	art VII Investment Income of a Section 50 ⁻¹ 1. Description of income				2. Amou incor	nt of	3. Deduction directly connected (attach states	ons ected	4. Set- (attach st		nt)	Total deductions and set-asides add cols 3 and 4)
(1)											_	
(2)											-	
(3) (4)												
Totals					Add amor column 2 here and o line 9, colu	. Enter n Part I, umn (A) 0 .					h	Add amounts in column 5. Enter ere and on Part I, ine 9, column (B)
Part	VIII Exploited E	xempt A	Activity Income,	Other T	Than Adve	ertising	g Income	see inst	tructions)			
1	Description of exploite	ed activity:										
2	Gross unrelated busin	ess incom	e from trade or busi	ness. Ente	r here and o	n Part I,	line 10, colum	n (A)		2		
3	Expenses directly con											
	line 10, column (B)									3		
4	Net income (loss) from						•					
_										4		
5	Gross income from ac									5		
6 7	Expenses attributable									6		
′	Excess exempt expenses. Subtract line 5 from line 6, b				or enter mor	ie amount on i	ıı I C		,			

Schedule A (Form 990-T) 2021

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Р:	ลเ	76	≘	-

Part	IX Advertising Income						igo 1
1	Name(s) of periodical(s). Check box if reporting	a two or i	more periodicals on a	consolidated basi	s		
•	A	.g :o o	more periodicale orra	oon loon dated basi	.		
	В						
	c 🗆						
	D		1. 1				
Enter	amounts for each periodical listed above in the	correspor	_				
			Α	В	С	D	
2	Gross advertising income						
	Add columns A through D. Enter here and on	Part I, lin	e 11, column (A)		>	•	0.
а				1	1		
3	Direct advertising costs by periodical						
а	Add columns A through D. Enter here and on	Part I, lin	e 11, column (B)		▶	•	0.
				1	1		
4	Advertising gain (loss). Subtract line 3 from lin	ne					
	2. For any column in line 4 showing a gain,						
	complete lines 5 through 8. For any column in						
	line 4 showing a loss or zero, do not complete	Э					
	lines 5 through 7, and enter zero on line 8						
5	Readership costs						
6	Circulation income						
7	Excess readership costs. If line 6 is less than						
	line 5, subtract line 6 from line 5. If line 5 is les	ss					
	than line 6, enter zero						
8	Excess readership costs allowed as a						
	deduction. For each column showing a gain of	n					
	line 4, enter the lesser of line 4 or line 7						
а	Add line 8, columns A through D. Enter the gr		he line 8a, columns to	tal or zero here ar	nd on		
	Part II, line 13					•	0.
Part	X Compensation of Officers, Dir	ectors,	and Trustees (s	ee instructions)			
					3. Percentage	4. Compensation	
	1. Name		2. Title		of time devoted	attributable to	
					to business	unrelated business	3
(1)					%		
(2)					%		
(3)					%		
(4)					%		
<u>,-</u>					, , ,		
Total	Enter here and on Part II, line 1				▶		0.
Part		e instruct	ions)		·····		
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FORM 990-T	STATEMENT						
DESCRIPTIO	NET INCO						
YEARLING F		-72 -21					
TOTAL INCL		-93					
101112 11(01							
990-T SCH	<u></u> А	POST-201	.7 NET OP:	ERATING :	LOSS DEDUCTION	STATEMEN	г 3
		POST-201	.7 NET OP. LOS PREVIO	S USLY	LOSS DEDUCTION LOSS REMAINING	STATEMENT AVAILABLE THIS YEAR	
990-T SCH			LOS	S USLY	LOSS	AVAILABLI THIS YEAR	
990-T SCH TAX YEAR 06/30/19 06/30/20		SUSTAINED	LOS	S USLY IED	LOSS REMAINING	AVAILABLE THIS YEAR	E R
990-T SCH TAX YEAR 06/30/19		SUSTAINED	LOS	S USLY IED	LOSS REMAINING	AVAILABLE THIS YEAR	E R

Return of U.S. Persons With Respect to Certain Foreign Partnerships

Attach to your tax return.

Go to www.irs.gov/Form8865 for instructions and the latest information.

OMB No. 1545-1668

Department of the Treasury Internal Revenue Service

Information furnished for the foreign partnership's tax year

2022

Attachment Sequence No. 865 APR 1 , 2021, and ending JUN 30 beainnina Name of person filing this return Filer's identification number THE COMMUNITY FOUNDATION OF 31-0997017 LOUISVILLE, INC. Filer's address (if you aren't filing this form with your tax return) Category of filer (see Categories of Filers in the instructions and check applicable box(es)) 3 X Filer's tax vea R JUL 1 2021 JUN 30 2022 , and ending beginning Filer's share of liabilities: Nonrecourse \$ Qualified nonrecourse financing \$ Other \$ D If filer is a member of a consolidated group but not the parent, enter the following information about the parent; EIN Address Check if any excepted specified foreign financial assets are reported on this form. See instructions Information about certain other partners (see instructions) (4) Check applicable box(es) (1) Name (2) Address (3) Identification number Category 2 2(a) EIN (if any) **G1** Name and address of foreign partnership GOLUB CAPITAL PARTNERS INTERNATIONAL 14. 00 - 0000002(b) Reference ID number L.P. C/O MAPLES CORPORATE SERVICES LIMITED GCPI14LP GRAND CAYMAN, CAYMAN ISLANDS KY1-1104 3 Country under whose laws organized CAYMAN ISLANDS 4 Date of organization 6 Principal business activity code number Exchange rate (see instructions) 5 Principal place of business 7 Principal business activity Functional currency 8b 8a 04/01/2022 CAYMAN ISLANDS 523900 INVESTMENTS USD 1.000000 H Provide the following information for the foreign partnership's tax year: 1 Name, address, and identification number of agent (if any) in the United States 2 Check if the foreign partnership must file: Form 1042 X Form 1065 Form 8804 Service Center where Form 1065 is filed: Name and address of person(s) with custody of the books and records of the foreign Name and address of person of such books and records, if different partnership, and the location of such books and records, if different partnership. 3 Name and address of foreign partnership's agent in country of organization, if any During the tax year, did the foreign partnership pay or accrue any interest or royalty for which the deduction is not X No allowed under section 267A? See instructions Yes If "Yes," enter the total amount of the disallowed deductions Is the partnership a section 721(c) partnership, as defined in Regulations section 1.721(c)-1(b)(14)? X No X No Were any special allocations made by the foreign partnership? Enter the number of Forms 8858, Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), attached to this return. See instructions 9 How is this partnership classified under the law of the country in which it's organized? 10 a Does the filer have an interest in the foreign partnership, or an interest indirectly through the foreign partnership, that's a separate unit under Regulations section 1.1503(d)-1(b)(4) or part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii)? If "No," skip question 10b X No b If "Yes," does the separate unit or combined separate unit have a dual consolidated loss, as defined in Regulations section 1.1503(d)-1(b)(5)(ii)? No Does this partnership meet both of the following requirements? 1. The partnership's total receipts for the tax year were less than \$250,000. 2. The value of the partnership's total assets at the end of the tax year was less than \$1 million. No

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 8865 (2021)

If "Yes," don't complete Schedules L, M-1, and M-2.

Form **8865** (2021)

SCHEDULE O (Form 8865)

Transfer of Property to a Foreign Partnership (Under Section 6038B)

OMB No. 1545-1668

(Rev. October 2021) Attach to Form 8865. See the Instructions for Form 8865. Department of the Treasury ► Go to www.irs.gov/Form8865 for instructions and the latest information. Internal Revenue Service Name of transferor THE COMMUNITY FOUNDATION OF Filer's identifying number 31-0997017 LOUISVILLE, INC. Name of foreign partnership GOLUB CAPITAL PARTNERS INTERNATIONAL 14 EIN (if any) Reference ID number (see instr) L.P. 00 - 0000000GCPI14LP 1a Is the partnership a section 721(c) partnership (as defined in Regulations section 1.721(c)-1(b)(14))? See instructions X No Yes No **b** If "Yes," was the gain deferral method applied to avoid the recognition of gain upon the contribution of property? Yes Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)? X No Yes Transfers Reportable Under Section 6038B Part I (b) (d) (e) (f) (g) Date of Description Fair market value Cost or other Recovery period Section 704(c) Gain recognized Type of property transfer of property on date of transfer basis allocation method on transfer 04/01/22 Cash 4,800,000 Stock, notes receivable and payable, and other securities Inventory Tangible property used in trade or business Intangible property described in section 197(f)(9) Intangible property, other than intangible property described in section 197(f)(9) Other property **Totals** 4,800,000. Enter the transferor's percentage interest in the partnership: (a) Before the transfer .0000 % (b) After the transfer 1.0521 Supplemental Information Required To Be Reported (see instructions):

Part II Dispositions Reportable Under Section 6038B (f) Depreciation (d) (g) Type of Date of Date of Manner of Gain Gain allocated Depreciation recapture recognized by partnership to partner property original disposition disposition recognized by recapture allocated transfer partnership Is any transfer reported on this schedule subject to gain recognition under section 904(f)(3) or section 904(f)(5)(F)? Yes Х

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 8865.

Schedule O (Form 8865) 10-2021

SCHEDULE G (Form 8865)

Statement of Application of the Gain Deferral Method Under Section 721(c)

(December 2021)

Department of the Treasury Internal Revenue Service

► Attach to Form 8865. See the Instructions for Form 8865.

OMB No. 1545-1668

► Go to www.irs.gov/Form8865 for instructions and the latest information.

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n filing Form 8865 THE COMM E, INC.	MUNITY FO	UNDATION	OF									cation numb	er
ership TTAL PARTNERS INTERNATIO		X Successor EIN (if any) partnership 00-000000				Reference ID number (see instructions) GCPI14LP							
ransferor (see instructions)		Successor			•	ta tha and a sa	X						
		ctions)					U.S. transferor	lax year of	gain deteri	rai cont	tribution	Annual	reporting
	I .	1	5	6	On the date of co	ntribi	ıtion				7 Events		
Description of property	Recovery period	Section 197(f)(9) property	Effectively connected income property	(a) Fair market value	(b) Basis	<u> Jirinbi</u>	(c)	(including partial	n Termina)	(c) Successor	(d) Tax disposition of a portion of partnership interest	(e) Section 367 transfer
From Part I additional statement(s), if any													
Do the tiered partnership rules of Regulations section 1.721(c)·3(d) apply to this partnership? See instructions Part II Remaining Built-in Gain, Remedial Income, and Gain Recognition (see instructions)													
	n, Remed	ial Incom	e, and Gai	n Recognition		ons)							
		, uilt-in gain at	- I				Gain recognized	Gain recognized		(e) Gain recognized due to section 367 tra			
	From Part I additional statement(s), if any Partnership TAL PARTNERS INTERNATION INTERNAT	From Part I additional statement(s), if any Pered partnership rules of Regulations section Remaining Built-in Gain, Remed (a) Reship TAL PARTNERS INTERNATIONAL 14, Section 721(c) Property (see instructions) 1. TAL PARTNERS INTERNATIONAL 14, Section 721(c) Property (see instructions) 1. TAL PARTNERS INTERNATIONAL 14, Section 721(c) Property (see instructions) 1. TAL PARTNERS INTERNATIONAL 14, Section 721(c) Property (see instructions) 1. TAL PARTNERS INTERNATIONAL 14, Section 721(c) Property (see instructions) 1. TAL PARTNERS INTERNATIONAL 14, Section 721(c) Property (see instructions) 1. TAL PARTNERS INTERNATIONAL 14, Section 721(c) Property (see instructions) 1. TAL PARTNERS INTERNATIONAL 14, Section 721(c) Property (see instructions) 2.	THE COMMUNITY FOUNDATION INC. THE COMMUNITY FOUNDATION OF INTERNATIONAL 14, TRAIL PARTNERS INTERNATIONAL 14, Section 721(c) Property (see instructions) 2.	THE COMMUNITY FOUNDATION OF ITAL PARTNERS INTERNATIONAL 14, Parasferor (see instructions) TAL PARTNERS INTERNATIONAL 14, Section 721(c) Property (see instructions) 2.	THE COMMUNITY FOUNDATION OF I, INC. INC.	THE COMMUNITY FOUNDATION OF ITAL PARTNERS INTERNATIONAL 14, Section 721(c) Property (see instructions) 2. 3. 4. Section 197(f)(9) period 197(f)(9) property (a) (b) Fair market value From Part I additional statement(s), if any Property International Income, and Gain Recognition (see instructions) Remaining Built-in Gain, Remedial Income, and Gain Recognition (see instructions) [8] Remaining built-in gain at Remedial Income and Gain Recognition (see instructions) [8] Remaining built-in gain at Remedial Income and Gain Recognition (see instructions)	THE COMMUNITY FOUNDATION OF INC. TAL PARTNERS INTERNATIONAL 14, Section 721(c) Property Period Port 1 additional statement(s), if any Ted partnership rules of Regulations section 1.721(c)-3(d) apply to this partnership? See instructions The Community Foundation of Poundation of Poundation of Partnership (a) Remaining Built-in Gain, Remedial Income, and Gain Recognition (see instructions) The Community Foundation of Poundation of Partnership (see instructions) The Community Foundation of Partnership (see instructions) The Community	THE COMMUNITY FOUNDATION OF It, INC. THE COMMUNITY FOUNDATION OF It, INC. THE COMMUNITY FOUNDATION OF It, INC. THE COMMUNITY FOUNDATION OF It, INC. THE COMMUNITY FOUNDATION OF It, INC. THE COMMUNITY FOUNDATION OF Ith PARTNERS INTERNATIONAL 14, Successor partnership O - 0000000 Filing year. (see in Tax year of, Section 721(c) Property (see instructions) 2. Description of property Period 197(f)(9) period 197(f)(9) property Period 197(f)(9) property Property Property Property Filing year. (see in Tax year of, Ith Community I	TAL PARTNERS INTERNATIONAL 14,	THE COMMUNITY FOUNDATION OF SITE COMMUNITY FO	Filer's identification of the community foundation of the community foundation of the community foundation of the community forms and the community fo	THE COMMUNITY FOUNDATION OF SIZE Identification numbers, INC. STORY PARTNERS INTERNATIONAL 14, partnership rules of Regulations section 1.721(c):3(d) apply to this partnership? See instructions. Filer's identification numbers in strain partnership partnership partnership numbers (see instructions). Successor partnership partnership rules of Regulations section 1.721(c):3(d) apply to this partnership? See instructions. Filer's identification numbers in 1.0997017 Successor partnership partnership numbers (see instructions). Successor partnership rules of Regulations section 1.721(c):3(d) apply to this partnership? See instructions. Filer's identification numbers in 1.0997017 Successor partnership numbers in 1.0900000000000000000000000000000000000	

For Paperwork Reduction Act Notice, see the Instructions for Form 8865.

Schedule G (Form 8865) (Rev. 12-2021)

^{*} Total must include any amounts included on an attached statement. See instructions.

Schedule G (Form 8865) (Rev. 12-2021)

Part III | Allocation Percents

Part I	III Allocati	on Percenta	ges or Partn	ersnip items	with Respe	ct to Section	/21(c) Prop	erty (see instr	uctions)					
		1. Income			2. Gain			3. Deduction		4. Loss				
	(a) (b) (c)		(b) (c) (a) (b) (c)		(c)	(a)	(a) (b) (c)			(b)	(c)			
Part I,	Ú.Ś.	Related domestic		U.S.	Related domestic		Ú.Ś.	Related domestic		(a) U.S.	Related domes	tic Re	lated for	eign
line number	transferor	partners	partners	transferor	partners	partners	transferor	partners	partners	transferor	partners		partners	3
1	%	%	%	6 %	%	%	%	%	%	%		%		%
2	%	%	%	6 %	%	%	%	%	%	%		%		%
3	%	%	%	%	%	%	%	%	%	%)	%		%
4	%						%		%	%	,	%		%
Part I	V Allocation	on of Items t	to U.S. Trans	feror With R	espect to Se	ection 721(c)	Property (se	ee instructions)						
D+-I		1. Income			2. Gain			3. Deduction			4. Loss			
Part I, line	(a)		(b)	(a)		(b)	(a)		(b)	(a)		(k	b)	
number	Book		Tax	Book		Tax	Book		Tax	Book			ax	
1														
2														
3														
4														
Part \	✓ Addition	nal Informati	on (see instruc	tions). If "Yes" to	any question 1	through 6b belov	w, complete Sch	iedule H.					Yes	No
1	During the tax ye	ear, did an accel	eration event or	partial accelerat	ion event (as des	scribed in Regula	tions section 1.	721(c)-4 or Regu	lations section					
	1.721(c)-5(d)) occ	cur with respect	to one or more	section 721(c) pr	operties?							1	$\sqcup \sqcup$	
2				described in Regu								2	$\sqcup \sqcup$	
3	During the tax ye	ear, did a succes	ssor event (as de	escribed in Regu	ations section 1	.721(c)-5(c)) occu	ır with respect to	o one or more se	ction 721(c) prop	perties?		3		
4	During the tax ye	ear, was there a	tax disposition	of a portion of an	interest in the p	artnership (as de	scribed in Regu	lations section 1	.721(c)-5(f))?			4		
5	During the tax ye	ear, was there a	direct or indirec	t transfer of sect	ion 721(c) prope	rty to a foreign c	orporation subje	ect to section 367	7 (as described in	า				
	Regulations sect	tion 1.721(c)-5(e)))?									5		
6a	Was any addition	nal section 721(ributed to the sec						de each				
	contributed prop	erty in Part I ab	ove and informa	tion with respect	to the property	in Parts II-IV abo	ve, and complet	e line 6b				6a	$\sqcup \sqcup$	
b	Is the gain defer	ral method appli	ed with respect	to one or more of	f such additiona	l section 721(c) ¡	property contribu	uted?				6b		
7a	Was a copy of th	ne waiver of trea	ty benefits (as d	escribed in Regu	lations section 1	.721(c)-6(b)(2)(iii)) filed with respe	ect to each section	on 721(c)					
	property contrib	ution to the sect	tion 721(c) partn	ership? If "Yes,"	complete line 7b)						7a	igsquare	
b				which a waiver of		was filed, after e	exercising reasor	nable diligence, h	nas the U.S. trans	sferor				
				d belief, all incon										
	•		,	ted with the con-				*		,				
		•		eign persons with nat neither the se	•	•	•		•					
				ax or a reduced ra										
	See Regulations	section 1.721-6	(b)(3)(vi)						(7b		
Part \	VI Suppler	nental Inforr	nation (see in	structions)										

SCHEDULE H (Form 8865)

(November 2018) Department of the Treasury Internal Revenue Service

Acceleration Events and Exceptions Reporting Relating to Gain Deferral Method Under Section 721(c)

Attach to Form 8865. See the Instructions for Form 8865.

OMB No. 1545-1668

► Go to www.irs.gov/Form8865 for instructions and the latest information. Filer's identifying number Name of person filing Form 8865 31-0997017 THE COMMUNITY FOUNDATION OF Successor EIN (if any) Name of partnership Reference ID number (see instructions) GOLUB CAPITAL PARTNERS INTERNATIONAL 14 partnership 00 - 0000000GCPI14LP Filing year: (see instructions) Name of U.S. transferor (see instructions) Successor GOLUB CAPITAL PARTNERS INTERNATIONAL 14 U.S. transferor Tax year of gain deferral contribution X Annual reporting Acceleration Event (see instructions) Part I (a) (b) (c) (e) (f) (d) Partnership's adjustment Schedule G. Description Date Partial Gain Part I, of of to section 721(c) acceleration recognized line number property tax basis event event event **Termination Event (see instructions)** Part II (a) (b) (c) Schedule G. Description Date Part I, of of line number event event Part III Successor Event (see instructions) (a) (b) (c) (d) Schedule G, Description Date Name, address, and U.S. taxpayer identification number (U.S. TIN) (if any) of Part I, of of successor partnership, lower-tier partnership, upper-tier partnership, or U.S. corporation (as applicable) line number event event Part IV Taxable Disposition of a Portion of an Interest in Partnership Event (see instructions) (b) (c) (e) Description Date Percentage Percentage Aggregate remaining built-in gain attributed to of partnership of of of partnership event event interest disposed interest retained partnership interest retained Part V Section 367 Transfer Event (see instructions) (b) (a) (c) (e) (d) Name, address, and U.S. TIN (if any) Schedule G. Description Date Gain Part I, of of foreign transferee recognized corporation (as applicable) line number event event Part VI Supplemental Information (see instructions)