

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

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

2023

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

A For the 2023 calendar year, or tax year beginning JUL 1, 2023 and ending JUN 30, 2024

Form header section containing organization name (BLUE GRASS COMMUNITY FOUNDATION, INC.), EIN (61-6053466), address (499 EAST HIGH STREET, LEXINGTON, KY 40507), and principal officer (LISA ADKINS).

Part I Summary

Table with 3 columns: Line number, Description, and Amount. Rows include mission statement, governance metrics, revenue (Total: 45,056,474), expenses (Total: 33,386,198), and net assets (Total: 227,497,553).

Part II Signature Block

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

Signature block containing officer signature (LISA ADKINS), preparer signature (KANDY L. WISCHMEIER), and firm information (BLUE & CO., LLC).

May the IRS discuss this return with the preparer shown above? See instructions [X] Yes [] No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: ESTABLISHED IN 1967, BLUE GRASS COMMUNITY FOUNDATION'S MISSION IS TO IMPROVE THE QUALITY OF LIFE IN THE BLUEGRASS REGION BY INCREASING CHARITABLE GIVING AND LEADING ON CRITICAL COMMUNITY ISSUES.

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 28,049,648. including grants of \$ 28,049,648.) (Revenue \$ 2,240,802.) GRANTMAKING THE COMMUNITY FOUNDATION MADE OVER 3,000 GRANTS THIS FISCAL YEAR IMPACTING MORE THAN 1,000 NONPROFIT ORGANIZATIONS AND OVER 120 SCHOLARSHIP RECIPIENTS.

4b (Code:) (Expenses \$ 3,163,336. including grants of \$) (Revenue \$) COMMUNITY ENGAGEMENT THE COMMUNITY FOUNDATION LEADS AND CONVENES ON KEY COMMUNITY ISSUES AND PROJECTS.

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 31,212,984.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 22 through 38 regarding organizational reporting, compensation, bond issues, and excess benefit transactions.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 19; 1b Enter the number of voting members included on line 1a... 19; 2 Did any officer, director, trustee, or key employee have a family relationship... X; 3 Did the organization delegate control over management duties... X; 4 Did the organization make any significant changes to its governing documents... X; 5 Did the organization become aware during the year of a significant diversion of the organization's assets... X; 6 Did the organization have members or stockholders... X; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body... X; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body... X; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? X; b Each committee with authority to act on behalf of the governing body? X; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O... X

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? X; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X; 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done X; 13 Did the organization have a written whistleblower policy? X; 14 Did the organization have a written document retention and destruction policy? X; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official X; b Other officers or key employees of the organization X; If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed KY
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[X] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
THE ORGANIZATION - 859-225-3343
499 EAST HIGH STREET, SUITE 112, LEXINGTON, KY 40507

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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) LISA ADKINS PRESIDENT/CEO	40.00			X			250,030.	0.	25,643.	
(2) BRIAN DINEEN VP OF FINANCE & ADMINISTRA	40.00			X			153,918.	0.	24,294.	
(3) SCOTT FITZPATRICK EMPLOYEE	40.00				X		121,896.	0.	18,791.	
(4) B. BLANTON COATES, JR. DIRECTOR	1.00	X					0.	0.	0.	
(5) GENTRY COLLINS DIRECTOR	1.00	X					0.	0.	0.	
(6) DR. TIFFANY DANIELS, D.C. DIRECTOR	1.00	X					0.	0.	0.	
(7) NOA GIMELLI DIRECTOR	1.00	X					0.	0.	0.	
(8) LISA HIGGINS-HORD DIRECTOR	1.00	X					0.	0.	0.	
(9) SUSAN KRAUSS DIRECTOR	1.00	X					0.	0.	0.	
(10) MIKE KRETZ DIRECTOR	1.00	X					0.	0.	0.	
(11) DARYL LOVE DIRECTOR	1.00	X					0.	0.	0.	
(12) WALTER MORRIS DIRECTOR	1.00	X					0.	0.	0.	
(13) DREW RODRIGUEZ DIRECTOR	1.00	X					0.	0.	0.	
(14) LESME ROMERO DIRECTOR	1.00	X					0.	0.	0.	
(15) ART SALOMON DIRECTOR	1.00	X					0.	0.	0.	
(16) SUZANNE SHAFFAR DIRECTOR	1.00	X					0.	0.	0.	
(17) ANDY REYNOLDS CHAIR	5.00	X		X			0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) MICHELLE HOLLINGSHEAD VICE CHAIR	5.00	X		X				0.	0.	0.
(19) MARSHA MOORS-CHARLES SECRETARY	5.00	X		X				0.	0.	0.
(20) BILL ALVERSON TREASURER	5.00	X		X				0.	0.	0.
(21) ANTHONY B. THOMPSON SCHOLARSHIPS CHAIR	5.00	X		X				0.	0.	0.
(22) FRAN TAYLOR PAST BOARD CHAIR	5.00	X		X				0.	0.	0.
1b Subtotal								525,844.	0.	68,728.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								525,844.	0.	68,728.

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

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
MASON INVESTMENT ADVISORY SERVICES, 11921 FREEDOM DRIVE, SUITE 1000, RESTON, VA	INVESTMENT SERVICES	291,750.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 1

Part VIII Statement of Revenue

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

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above ...	1f	26,435,139.				
	g	Noncash contributions included in lines 1a-1f	1g	\$				
	h	Total. Add lines 1a-1f			26,435,139.			
Program Service Revenue	2 a	COMMUNITY SUPPORT FEES	Business Code	624110	2,240,928.	2,240,928.		
	b							
	c							
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f			2,240,928.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			9,948,893.		736,053.	
	4	Income from investment of tax-exempt bond proceeds					9212840.	
	5	Royalties						
	6 a	Gross rents	(i) Real	21,556.				
			(ii) Personal					
	b	Less: rental expenses ...	6b	21,682.				
	c	Rental income or (loss)	6c	-126.				
	d	Net rental income or (loss)			-126.	-126.		
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	48,793,095.				
			(ii) Other					
	b	Less: cost or other basis and sales expenses	7b	42,361,455.				
	c	Gain or (loss)	7c	6,431,640.				
d	Net gain or (loss)			6,431,640.		6431640.		
8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b	Less: direct expenses	8b						
c	Net income or (loss) from fundraising events							
9 a	Gross income from gaming activities. See Part IV, line 19	9a						
b	Less: direct expenses	9b						
c	Net income or (loss) from gaming activities							
10 a	Gross sales of inventory, less returns and allowances	10a						
b	Less: cost of goods sold	10b						
c	Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a		Business Code					
	b							
	c							
	d	All other revenue						
	e	Total. Add lines 11a-11d						
12	Total revenue. See instructions			45,056,474.	2,240,802.	736,053.	15644480.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	27,523,587.	27,523,587.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	526,061.	526,061.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	489,676.	240,918.	216,561.	32,197.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	830,167.	408,437.	367,145.	54,585.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	81,007.	39,855.	35,826.	5,326.
9 Other employee benefits	84,230.	41,441.	37,251.	5,538.
10 Payroll taxes	92,631.	45,574.	40,966.	6,091.
11 Fees for services (nonemployees):				
a Management				
b Legal	13,363.		13,363.	
c Accounting	13,363.		13,363.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	760,539.		760,539.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	78,789.	17,775.	55,646.	5,368.
12 Advertising and promotion	137,758.	123,982.		13,776.
13 Office expenses	64,671.		64,671.	
14 Information technology	141,241.		31,696.	109,545.
15 Royalties				
16 Occupancy	12,471.		12,471.	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	30,038.		30,038.	
20 Interest	16,449.		16,449.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	24,038.	14,182.	8,173.	1,683.
23 Insurance	18,193.		18,193.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a ESTIMATED TAX PAYMENTS	16,560.		16,560.	
b COMMUNITY SUPPORT FEES	2,150,347.	2,150,347.		
c OTHER INSURANCE PREMIUM	93,088.	64,621.	27,841.	626.
d SERVICE AGREEMENTS	92,335.		92,335.	
e All other expenses	95,596.	16,204.	62,812.	16,580.
25 Total functional expenses. Add lines 1 through 24e	33,386,198.	31,212,984.	1,921,899.	251,315.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	21,660,097.	2	32,970,357.
	3 Pledges and grants receivable, net	292,417.	3	369,077.
	4 Accounts receivable, net	348.	4	33.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,093,243.		
	b Less: accumulated depreciation	10b 576,547.	540,736.	10c 516,696.
	11 Investments - publicly traded securities	191,857,592.	11	210,269,930.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	9,021,873.	15	8,826,636.
16 Total assets. Add lines 1 through 15 (must equal line 33)	223,373,063.	16	252,952,729.	
Liabilities	17 Accounts payable and accrued expenses	3,746.	17	45,342.
	18 Grants payable	908,223.	18	637,690.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	21,191,871.	21	24,337,385.
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	450,308.	23	434,759.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	22,554,148.	26	25,455,176.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	727,186.	27	332,972.
	28 Net assets with donor restrictions	200,091,729.	28	227,164,581.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	200,818,915.	32	227,497,553.
33 Total liabilities and net assets/fund balances	223,373,063.	33	252,952,729.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	45,056,474.
2	Total expenses (must equal Part IX, column (A), line 25)	2	33,386,198.
3	Revenue less expenses. Subtract line 2 from line 1	3	11,670,276.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	200,818,915.
5	Net unrealized gains (losses) on investments	5	18,173,370.
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	-3,165,008.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	227,497,553.

Part XII Financial Statements and Reporting

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

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2023)

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	17159035.	22429835.	43476808.	46563896.	26435139.	156064713
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	17159035.	22429835.	43476808.	46563896.	26435139.	156064713
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)						26759381.
6 Public support. Subtract line 5 from line 4.						129305332

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	17159035.	22429835.	43476808.	46563896.	26435139.	156064713
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	3302764.	3303023.	5885055.	6830635.	9212840.	28534317.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	-18,420.	-2,208.	1,399.	403,090.	736,053.	1119914.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						185718944
12 Gross receipts from related activities, etc. (see instructions)					12	10,033,438.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))	14	69.62 %
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	65.64 %
16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>	

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2023. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

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

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2023 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2023		
a	From 2018		
b	From 2019		
c	From 2020		
d	From 2021		
e	From 2022		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2023 distributable amount		
i	Carryover from 2018 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2023 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2023 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2024. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2019		
b	Excess from 2020		
c	Excess from 2021		
d	Excess from 2022		
e	Excess from 2023		

Schedule A (Form 990) 2023

Part 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 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Multiple horizontal lines for supplemental information.

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2023

Name of the organization

BLUE GRASS COMMUNITY FOUNDATION, INC.

Employer identification number

61-6053466

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ _____

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

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2023)

Name of organization BLUE GRASS COMMUNITY FOUNDATION, INC.	Employer identification number 61-6053466
--------------------------------------------------------------------------	---------------------------------------------------------

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ <u>4,197,437.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ <u>866,695.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ <u>655,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ <u>618,721.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ <u>550,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	<hr/> <hr/> <hr/>	\$ <u>530,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization BLUE GRASS COMMUNITY FOUNDATION, INC.	Employer identification number 61-6053466
--------------------------------------------------------------------------	---------------------------------------------------------

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____

Name of organization BLUE GRASS COMMUNITY FOUNDATION, INC.	Employer identification number 61-6053466
--------------------------------------------------------------------------	---------------------------------------------------------

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

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

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization **BLUE GRASS COMMUNITY FOUNDATION, INC.** Employer identification number **61-6053466**

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	407	
2 Aggregate value of contributions to (during year)	8,645,907.	
3 Aggregate value of grants from (during year)	12,035,127.	
4 Aggregate value at end of year	133,105,531.	
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

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

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

Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements	
b Total acreage restricted by conservation easements	
c Number of conservation easements on a certified historic structure included on line 2a	
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

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

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

8 Does each conservation easement reported on line 2d above 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 easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

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

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

(ii) Assets included in Form 990, Part X \$ _____

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

a Revenue included on Form 990, Part VIII, line 1 \$ _____

b Assets included in Form 990, Part X \$ _____

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2023

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

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	124,072,643.	111,727,250.	124,343,621.	90,756,067.	92,641,008.
b Contributions	10,520,675.	6,761,782.	4,695,716.	5,400,688.	3,839,463.
c Net investment earnings, gains, and losses	16,553,107.	10,618,303.	-12,643,545.	31,895,480.	-1,570,396.
d Grants or scholarships	4,849,109.	3,782,619.	3,810,106.	3,283,559.	3,254,381.
e Other expenditures for facilities and programs					
f Administrative expenses	1,795,253.	1,252,073.	858,436.	425,055.	899,627.
g End of year balance	144,502,063.	124,072,643.	111,727,250.	124,343,621.	90,756,067.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____%
 - b Permanent endowment _____%
 - c Term endowment 100 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|
| (i) Unrelated organizations? | | <input checked="" type="checkbox"/> |
| (ii) Related organizations? | | <input checked="" type="checkbox"/> |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		663,193.	192,840.	470,353.
c Leasehold improvements				
d Equipment		430,050.	383,707.	46,343.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				516,696.

Part VII Investments - Other Securities

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

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

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, line 13, col. (B))		

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, line 15, col. (B))	

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)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	

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

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

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

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

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

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

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

Part XIII Supplemental Information

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

PART IV, LINE 2B:

THE FOUNDATION ACTS AS AN AGENT FOR CERTAIN THIRD PARTY NON PROFIT ORGANIZATIONS, THE THIRD PARTIES ENTRUST THE FOUNDATION TO MANAGE CERTAIN ASSETS FOR GAAP PURPOSES, PURSUANT TO SFAS 136. THE FOUNDATION HAS RECORDED THESE FUNDS AS A LIABILITY, WHICH IS OFFSET BY THE ASSETS MANAGED FROM THE THIRD PARTY. FOR PURPOSES OF THE FORM 990, CONTRIBUTIONS TO THE FOUNDATION FOR AN AGENCY ENDOWMENT WILL BE TREATED AS A CONTRIBUTION TO THE FOUNDATION. THIS HAS BEEN REFLECTED AS A RECONCILING ITEM WITH THE AUDITED FINANCIAL STATEMENTS.

PART V, LINE 4:

ENDOWED ASSETS INCLUDE THOSE ASSETS OF DONOR RESTRICTED FUNDS THAT THE

Part XIII Supplemental Information (continued)

FOUNDATION INTENDS TO, BUT IS NOT REQUIRED TO, HOLD IN PERPETUITY AS WELL AS BOARD DESIGNATED FUNDS. THE ENDOWED INVESTMENTS GENERATE GRANT DOLLARS FOR THE SOLE PURPOSE OF PROVIDING FOR THE NEEDS AND ACTIVITIES OF THE COMMUNITY SERVICED BY THE FOUNDATION.

PART X, LINE 2:

THE FOUNDATION IS A NOT-FOR-PROFIT CORPORATION AS DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND IS EXEMPT FROM FEDERAL TAXES ON RELATED INCOME PURSUANT TO SECTION 501(A) OF THE CODE. THE LLC IS DISREGARDED FOR INCOME TAX PURPOSES AND ALL OF ITS ACTIVITIES ATTRIBUTE TO THE FOUNDATION.

ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA REQUIRE MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN BY THE ORGANIZATION AND RECOGNIZE A TAX LIABILITY IF THE ORGANIZATION HAS TAKEN AN UNCERTAIN POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED UPON EXAMINATION BY VARIOUS FEDERAL AND STATE TAXING AUTHORITIES. MANAGEMENT HAS ANALYZED THE TAX POSITIONS TAKEN BY THE ORGANIZATION, AND HAS CONCLUDED THAT AS OF JUNE 30, 2024 AND 2023, THERE ARE NO UNCERTAIN POSITIONS TAKEN OR EXPECTED TO BE TAKEN THAT WOULD REQUIRE RECOGNITION OF A LIABILITY OR DISCLOSURE IN THE ACCOMPANYING CONSOLIDATED FINANCIAL STATEMENTS. THE ORGANIZATION IS SUBJECT TO ROUTINE AUDITS BY TAXING JURISDICTIONS; HOWEVER, THERE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIODS IN PROGRESS.

AS SUCH, THE ORGANIZATION IS GENERALLY EXEMPT FROM INCOME TAXES. HOWEVER, THE ORGANIZATION IS REQUIRED TO FILE FEDERAL FORM 990 RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX WHICH IS AN INFORMATIONAL RETURN ONLY.

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 the Instructions for Form 926)* Yes 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 the Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes 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 the Instructions for Form 5471)* Yes 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 the Instructions for Form 8621)* Yes 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 the Instructions for Form 8865)* 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 the Instructions for Form 5713; don't file with Form 990)* Yes No

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.

PART I, LINE 2:

THE ORGANIZATION USES THE SAME PROCEDURES FOR GRANT MAKING BOTH INSIDE AND OUTSIDE THE US

Multiple horizontal lines for supplemental information.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization **BLUE GRASS COMMUNITY FOUNDATION, INC.** Employer identification number **61-6053466**

Part I General Information on Grants and Assistance

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
MAGOFFIN COUNTY BOARD OF EDUCATION 25 SCHOOL DRIVE SALYERSVILLE, KY 41465		SCHOOL	5,000,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
UNIVERSITY OF KENTUCKY ATHLETICS JOE CRAFT CENTER 338 LEXINGTON AVEN LEXINGTON, KY 40506	61-0501295	501(C)3	1,469,650.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
UNIVERSITY OF KENTUCKY OFFICE OF PHILANTHROPY PO BOX 91062 LEXINGTON, KY 40591	61-6001218	501(C)3	1,009,316.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
BANK OF AMERICA CHARITABLE GIFT FUND - 100 FEDERAL ST - BOSTON, MA 02110	04-6010342	501(C)3	988,753.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ROBERT L. BROWN FOUNDATION, INC. 499 E HIGH STREET SUITE 112 LEXINGTON, KY 40507	88-2334409	501(C)3	612,512.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
STABLE RECOVERY INCORPORATED 321 HUMMINGBIRD LANE LEXINGTON, KY 40503	88-2730933	501(C)3	582,733.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **347.**

3 Enter total number of other organizations listed in the line 1 table **22.**

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

Schedule I (Form 990) 2023

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
1 CLAY COUNTY INC PO BOX 136 MANCHESTER, KY 40962	88-4177324	501(C)3	425,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ESPERANZA INC C/O SKW CPAS AND ADVISORS 183 WALTO LEXINGTON, KY 40508	37-1910596	501(C)3	314,500.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
WHETSTONE BOYS RANCH 6850 CR 2660 MOUNTAIN VIEW, MO 65548	20-2577841	501(C)3	300,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LEGACY GREENSCAPES PO BOX 4844 WINCHESTER, KY 40392	81-5257939	501(C)3	291,345.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
FAYETTE COUNTY PUBLIC SCHOOLS AP MAIN ACCOUNT PO BOX 55490 LEXINGTON, KY 40555	61-6001059	501(C)3	261,269.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
HEARTS IN MIND INC PO BOX 607 PARIS, KY 40362	88-3042121	501(C)3	257,800.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
HOUSING DEVELOPMENT ALLIANCE 2871 N MAIN ST HAZARD, KY 41701	61-1253346	501(C)3	250,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
AMERICAN ENTERPRISE INSTITUTE FOR PUBLIC POLICY RESEARCH - EVP 1789 MASSACHUSETTS AVE, NW - WASHINGTON, DC 20036	53-0218495	501(C)3	250,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
BLUE GRASS CHRISTIAN CAMP 7463 ATHENS BOONESBORO RD LEXINGTON, KY 40509	61-0714628	501(C)3	250,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH FEDERATION OF THE BLUEGRASS, INC. - 124 N ASHLAND AVE - LEXINGTON, KY 40502	31-0906786	501(C)3	226,780.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CLARK COUNTY FISCAL COURT 34 SOUTH MAIN STREET WINCHESTER, KY 40391	61-6000993	501(C)3	222,462.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CROWN HILL CEMETERY PO BOX 183 SHARPSBURG, KY 40374	80-0654604	501(C)3	203,208.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LEXINGTON RESCUE MISSION PO BOX 1050 LEXINGTON, KY 40588	61-1387338	501(C)3	190,220.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
GATTON PARK ON THE TOWN BRANCH ATTN: BEN SHAFFAR 249 E MAIN ST STE LEXINGTON, KY 40507	83-4621324	501(C)3	185,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LEXINGTON CHILDREN'S THEATRE 418 WEST SHORT STREET LEXINGTON, KY 40507	61-0929277	501(C)3	173,627.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CATHOLIC EDUCATION FOR YOUTH FOUNDATION, INC. - PO BOX 2439 - ASHLAND, KY 41105-2439	61-1169325	501(C)3	155,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
HOUSING ORIENTED MINISTRIES ESTABLISHED FOR SERVICES INC. - 65 BENTLEY AVE - WHITESBURG, KY 41858	61-1060053	501(C)3	150,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
THE WORKING WORLD, INC. 228 PARK AVENUE SOUTH, SUITE 65768 NEW YORK, NY 10003-1502	20-2264584	501(C)3	150,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOLY SPIRIT PARISH / UK CATHOLIC NEWMAN CENTER - 320 ROSE LANE - LEXINGTON, KY 40508	61-0857703	501(C)3	150,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
AMERICAN HEART ASSOCIATION 354 WALLER AVENUE, #110 LEXINGTON, KY 40504	13-5613797	501(C)3	146,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LFUCG DIVISION OF GRANTS AND SPECIAL PROGRAMS - 200 EAST MAIN STREET SIXTH FLOOR - LEXINGTON, KY 40507		GOVERNMENT	141,597.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
BLACK MALE WORKING (BMW) ACADEMY 3016 BRACKTOWN ROAD LEXINGTON, KY 40511	81-1743559	501(C)3	131,818.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
JUBILEE JOBS OF LEXINGTON 535 W SECOND ST, STE 205 LEXINGTON, KY 40508	27-1058855	501(C)3	130,520.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
FIRST METHODIST CHURCH PO BOX 307 CYNTHIANA, KY 41031		CHURCH	125,949.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ROWLAND ARTS CENTER 57 S. MAIN STREET, SUITE 2 WINCHESTER, KY 40391	81-5011439	501(C)3	125,710.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
NORTHSIDE COMMON MARKET 101 W. LOUDON AVE SUITE 140 LEXINGTON, KY 40508	83-4226201	501(C)3	125,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ARH FOUNDATION FOR HEALTHIER COMMUNITIES INC. - 2260 EXECUTIVE DR - LEXINGTON, KY 40505	20-4840007	501(C)3	120,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DYNAMIC CATHOLIC INSTITUTE 5081 OLYMPIC BLVD. ERLANGER, KY 41018	26-4549213	501(C)3	120,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
THE NEST - CENTER FOR WOMEN, CHILDREN AND FAMILIES - 530 N LIMESTONE ST - LEXINGTON, KY 40508	31-0904247	501(C)3	117,027.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LEXINGTON PUBLIC LIBRARY FOUNDATION, INC. - 140 EAST MAIN STREET - LEXINGTON, KY 40507	31-1565272	501(C)3	115,623.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
JUST FUND EDUCATION PROJECT INC. PO BOX 21815 LEXINGTON, KY 40522-1815	20-8465456	501(C)3	107,464.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
KENTUCKY EQUAL JUSTICE CENTER 201 WEST SHORT STREET SUITE 310 LEXINGTON, KY 40507	61-0909545	501(C)3	106,933.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ST. JOHN PAUL II CATHOLIC HIGH SCHOOL - 3120 NORTH 137TH AVENUE - AVONDALE, AZ 85392	61-1815605	501(C)3	102,007.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CENTER FOR THIRD WORLD ORGANIZING 1714 FRANKLIN STREET SUITE 100-245 OAKLAND, CA 94612	52-1211059	501(C)3	100,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CENTRAL EUROPEAN CHRISTIAN EDUCATION FOUNDATION - 1045 OVERTON LEA RD - NASHVILLE, TN 37220	47-1556323	501(C)3	100,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
COWAN COMMUNITY ACTION GROUP, INC. PO BOX 268 WHITESBURG, KY 41858	61-1396831	501(C)3	100,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTRAL KENTUCKY YOUTH ORCHESTRA SOCIETY, INC. - 161 NORTH MILL STREET - LEXINGTON, KY 40507	61-6027055	501(C)3	93,704.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CIVICLEX 163 E. MAIN STREET, SUITE 130 LEXINGTON, KY 40507	46-1517609	501(C)3	92,723.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LEXINGTON CATHOLIC HIGH SCHOOL 2250 CLAYS MILL ROAD LEXINGTON, KY 40503-1797	61-1132894	501(C)3	92,145.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
HORSE COUNTRY, INC. PO BOX 84 LEXINGTON, KY 40588	47-1608262	501(C)3	85,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LEXINGTON PHILHARMONIC 161 NORTH MILL STREET LEXINGTON, KY 40507	61-6033529	501(C)3	83,424.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LEEDS CENTER FOR THE ARTS 37 N MAIN ST WINCHESTER, KY 40391	61-1105067	501(C)3	81,749.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
GOD'S PANTRY FOOD BANK 1685 JAGGIE FOX WAY LEXINGTON, KY 40511	31-0979404	501(C)3	80,548.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
GATEWAY REGIONAL ARTS CENTER 101 E MAIN ST MT. STERLING, KY 40353	61-1224757	501(C)3	79,521.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
APPALSHOP, INC. PO BOX 1325 WHITESBURG, KY 41858	61-0890210	501(C)3	75,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KENTUCKY STATE UNIVERSITY FINANCIAL AID 400 EAST MAIN STREET FRANKFORT, KY 40601		SCHOOL	75,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
BVM BLUE MANTLE PRODUCTIONS COMPANY - 122 AMEN CORNER WAY - GEORGETOWN, KY 40324	92-1336552	501(C)3	75,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
THE HEARING AND SPEECH CENTER 350 HENRY CLAY BOULEVARD LEXINGTON, KY 40502	61-0593951	501(C)3	72,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
COMMUNITY RESPONSE COALITION OF KENTUCKY, INC. - 153 PATCHEN DRIVE SUITE 39 - LEXINGTON, KY 40517	84-2433939	501(C)3	71,530.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
TRINITY CHRISTIAN ACADEMY OF LEXINGTON - 3900 RAPID RUN DR - LEXINGTON, KY 40515	45-4109893	501(C)3	70,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CENTRE COLLEGE OFFICE OF DEVELOPMENT AND ALUMNI ENGAGEMENT 600 W. WALNUT STREET - DANVILLE,	61-0444671	501(C)3	70,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
RONALD MCDONALD HOUSE CHARITIES OF THE BLUEGRASS - P.O. BOX 22414 - LEXINGTON, KY 40522	61-0986164	501(C)3	69,997.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
DOLLYWOOD FOUNDATION - DOLLY PARTON'S IMAGINATION LIBRARY - 111 E MAIN ST, 2ND FLOOR - SEVIERVILLE, TN 37862	62-1348105	501(C)3	68,599.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CLARK COUNTY ASSOCIATION FOR HANDICAPPED CITIZENS INC - PO BOX 643 - WINCHESTER, KY 40392	61-0670763	501(C)3	68,439.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY OF WINCHESTER PO BOX 40 WINCHESTER, KY 40392-0040		GOVERNMENT	65,040.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CLARK COUNTY BOARD OF EDUCATION 1600 WEST LEXINGTON AVENUE WINCHESTER, KY 40391	61-6001382	501(C)3	63,250.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LOWER HOWARD'S CREEK NATURE AND HERITAGE PRESERVE - C/O KARIS PUMPHREY 6691 COLBY ROAD - WINCHESTER, KY 40391	87-0934883	501(C)3	63,075.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
UNIVERSITY OF KENTUCKY RESEARCH FOUNDATION - C/O PNC BANK PO BOX 931113 - CLEVELAND, OH 44193	61-6033693	501(C)3	62,927.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
STEP BY STEP, INC. 3320 TATES CREEK RD STE 200 LEXINGTON, KY 40502	61-1313872	501(C)3	62,681.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
MARY QUEEN OF THE HOLY ROSARY PARISH - ATTN: BUSINESS MANAGER 601 HILL N DALE DRIVE - LEXINGTON, KY 40503	27-1284772	501(C)3	59,700.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
NATURE CONSERVANCY 114 WOODLAND AVENUE LEXINGTON, KY 40502	53-0242652	501(C)3	59,500.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
HARRISON COUNTY BAND ASSOCIATION 320 WEBSTER AVE CYNTHIANA, KY 41031	92-3195346	501(C)3	56,402.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
GOLDEN RETRIEVER RESCUE AND ADOPTION OF NEEDY DOGS INC - PO BOX 6132 - LOUISVILLE, KY 40206	61-1314499	501(C)3	54,500.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BLUE WINGS OF HOPE INC PO BOX 1851 LEXINGTON, KY 40588-1851	86-2400569	501(C)3	53,927.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ED BROWN SOCIETY 4101 TATES CREEK CENTRE DR. SUITE 1 LEXINGTON, KY 40517	85-2584555	501(C)3	51,205.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
OHAVAY ZION SYNAGOGUE 2048 EDGEWATER COURT LEXINGTON, KY 40502	61-0649672	501(C)3	50,354.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
REDWOOD COOPERATIVE SCHOOL 166 CRESTWOOD DR LEXINGTON, KY 40503	47-3474333	501(C)3	50,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
KENTUCKY CIVIC ENGAGEMENT TABLE INC. - 2430 PORTLAND AVE. - LOUISVILLE, KY 40212	83-2413836	501(C)3	50,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
HIS WAY AT WORK 1790 DEWBERRY ROAD SPARTANBURG, SC 29307	26-2522139	501(C)3	50,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
AMERICAN RED CROSS SOUTHEAST CARIBBEAN AND CAROLINAS DIVISION 2201 CHARLOTTE AVENUE - NASHVILLE	53-0196605	501(C)3	50,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
JOSEPHINE SCULPTURE PARK 3355 LAWRENCEBURG ROAD FRANKFORT, KY 40601-8932	27-0686281	501(C)3	50,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
EXPLORIUM OF LEXINGTON DBA LEXINGTON CHILDREN'S MUSEUM - 440 W SHORT ST - LEXINGTON, KY 40507	61-1183278	501(C)3	50,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLARK COUNTY COMMUNITY SERVICES PO BOX 574 30 TAYLOR AVENUE WINCHESTER, KENTUCKY, KENYA 40392	31-1005844	501(C)3	48,489.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
BLUEGRASS COMMUNITY AND TECHNICAL COLLEGE - WINCHESTER-CLARK COUNTY CAMPUS 1919 ROLLING HILLS LN - WINCHESTER, KY 40391		SCHOOL	46,611.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
PARIS INDEPENDENT SCHOOLS ATTN: JENNIFER WILSON 310 W. 7TH S PARIS, KY 40361		SCHOOL	45,681.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
BLUEGRASS CARE NAVIGATORS 1733 HARRODSBURG ROAD LEXINGTON, KY 40504	61-0978097	501(C)3	45,122.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
UNIVERSITY OF KENTUCKY MARKEY CANCER FOUNDATION INC. - 115 WALLER AVE, STE 204 - LEXINGTON, KY 40503	31-0944925	501(C)3	45,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CROSSROADS CHRISTIAN CHURCH ATTN: GIVING 3500 MADISON ROAD CINCINNATI, OH 45209	61-1133403	501(C)3	45,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
SHEPHERD'S HOUSE, INC. 365 WALLER AVE, STE 230 LEXINGTON, KY 40504	61-1105573	501(C)3	45,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ST. AGATHA ACADEMY 244 S MAIN ST WINCHESTER, KY 40391	61-1132894	501(C)3	44,913.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
SHRINERS HOSPITALS FOR CHILDREN 110 CONN TERRACE LEXINGTON, KY 40508	36-2193608	501(C)3	42,509.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMON GOOD COMMUNITY DEVELOPMENT CORPORATION - 1015 N LIMESTONE ST - LEXINGTON, KY 40505	45-3950421	501(C)3	41,765.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
SUNRISE CHILDREN'S SERVICES 300 HOPE STREET P.O. BOX 1429 MOUNT WASHINGTON, KY 40047	61-0597273	501(C)3	41,500.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CLARK COUNTY HOMELESS COALITION 275 W. LEXINGTON AVE WINCHESTER, KY 40391	27-1281819	501(C)3	41,379.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
PROVIDENCE MONTESSORI SCHOOL, INC. ATTN: BUSINESS MANAGER 1209 TEXACO LEXINGTON, KY 40508-2026	31-1041787	501(C)3	40,161.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
BLUEGRASS HERITAGE MUSEUM, INC 217 SOUTH MAIN STREET WINCHESTER, KY 40391	61-1377512	501(C)3	40,129.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
FOODCHAIN, INC. 501 WEST SIXTH STREET, SUITE 105 LEXINGTON, KY 40508	45-4088193	501(C)3	39,408.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
COMMUNITY FOUNDATION OF LOUISVILLE 325 WEST MAIN STREET SUITE 1110 LOUISVILLE, KY 40202	31-0997017	501(C)3	37,703.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
BLESSING HANDS 106 TIMBER LANE MOREHEAD, KY 40351	20-4794276	501(C)3	37,455.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CASA OF LEXINGTON 3245 LOCH NESS DR LEXINGTON, KY 40517	61-1138597	501(C)3	37,153.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIG BROTHERS BIG SISTERS OF THE BLUEGRASS - 181 W. LOWRY LANE, SUITE 150 - LEXINGTON, KY 40503	61-0523288	501(C)3	36,169.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ST. JOSEPH INSTITUTE FOR THE DEAF 9192 WALDEMAR ROAD INDIANAPOLIS, IN 46268	43-0653494	501(C)3	36,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
SHAKERTOWN AT PLEASANT HILL KENTUCKY INC. - 3501 LEXINGTON ROAD - HARRODSBURG, KY 40330-8846	61-0592561	501(C)3	35,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LEXARTS ARTSPLACE 161 NORTH MILL STREET LEXINGTON, KY 40507	61-1163184	501(C)3	34,147.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
KENTUCKY HEARTWOOD, INC. P.O. BOX 1486 BERE A, KY 40403	01-0701145	501(C)3	34,035.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
KENTUCKY REFUGEE MINISTRIES 501 W 6TH ST, SUITE 250 LEXINGTON, KY 40508	61-1229842	501(C)3	33,910.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LIGHTHOUSE MINISTRIES, INC. 190 SPRUCE ST LEXINGTON, KY 40507	52-2137309	501(C)3	33,235.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
NEW BEGINNINGS OF WINCHESTER INC. 139 JEFFERSON STREET WINCHESTER, KY 40391	61-1180957	501(C)3	32,872.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
GLEAN KENTUCKY 628 N. BROADWAY LEXINGTON, KY 40508	27-4087963	501(C)3	32,600.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ROMAN CATHOLIC DIOCESE OF LEXINGTON - DEVELOPMENT OFFICE 1310 W MAIN ST - LEXINGTON, KY 40508	61-1132894	501(C)3	32,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ART CENTER OF THE BLUEGRASS 401 WEST MAIN STREET DANVILLE, KY 40422	16-1674338	501(C)3	31,543.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
GREENHOUSE17 PO BOX 55190 LEXINGTON, KY 40555-5190	20-1965942	501(C)3	31,435.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LEXINGTON HUMANE SOCIETY 1600 OLD FRANKFORT PIKE LEXINGTON, KY 40504	61-0444762	501(C)3	31,021.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CHRIST CHURCH CATHEDRAL 166 MARKET STREET LEXINGTON, KY 40507	61-0444674	501(C)3	31,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
MISSION HEALTH LEXINGTON 230 S MARTIN LUTHER KING BLVD LEXINGTON, KY 40508	20-2824933	501(C)3	30,871.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CITY OF SHARPSBURG ATTN: MAYOR PO BOX 128 SHARPSBURG, KY 40374		GOVERNMENT	30,852.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CLARK COALITION FOUNDATION 1585 BOONESBORO RD WINCHESTER, KY 40391	86-1380829	501(C)3	30,631.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
BEACON OF HOPE EMERGENCY SHELTER, INC. - 850 BYPASS ROAD - WINCHESTER, KY 40391	47-2374897	501(C)3	30,385.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EDITH AND HENRY HEUSER HEARING INSTITUTE - 117 E KENTUCKY ST - LOUISVILLE, KY 40203	61-1383955	501(C)3	30,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
YMCA OF CENTRAL KENTUCKY 381 W LOUDON AVE LEXINGTON, KY 40508	61-0444842	501(C)3	30,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LEXINGTON CHALLENGER TENNIS CHARITY, INC. - 410 REDDING RD - LEXINGTON, KY 40517	90-0793920	501(C)3	30,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
AMEN HOUSE PO BOX 211 GEORGETOWN, KY 40324	61-1236411	501(C)3	29,613.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
BEREA COLLEGE ACCOUNTS PAYABLE CPO 2201 BEREA, KY 40404	61-0444650	501(C)3	29,161.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ASHLAND, THE HENRY CLAY ESTATE 120 SYCAMORE ROAD LEXINGTON, KY 40502	61-0461732	501(C)3	28,872.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
SALVATION ARMY LEXINGTON 736 WEST MAIN STREET LEXINGTON, KY 40508-2096	13-5562351	501(C)3	28,120.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CENTRAL CHRISTIAN CHURCH 219 E. SHORT STREET LEXINGTON, KY 40507	61-0525160	501(C)3	27,776.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
FIRST UNITED METHODIST CHURCH 211 WASHINGTON ST FRANKFORT, KY 40601		CHURCH	27,500.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIDELITY INVESTMENTS CHARITABLE GIFT FUND - PO BOX 770001 - CINCINNATI, OH 45277-0053	11-0303001	501(C)3	27,500.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
FRIENDS OF THE CLARK COUNTY ANIMAL SHELTER - P.O. BOX 4795 - WINCHESTER, KY 40392	82-4070512	501(C)3	26,677.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
MARCO SHEMWELL FOUNDATION 431 LYNNWAY DRIVE WINCHESTER, KY 40391	83-2581137	501(C)3	26,579.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CHRYSALIS HOUSE, INC. 1589 HILL RISE DRIVE LEXINGTON, KY 40504	61-1012290	501(C)3	26,325.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
SCOTT EDUCATION FOUNDATION INC. 647 SOUTH BROADWAY GEORGETOWN, KY 40324	61-1224243	501(C)3	25,958.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ALLEGRO DANCE PROJECT, INC. 315 SIERRA DR. LEXINGTON, KY 40505	46-4066462	501(C)3	25,368.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
AMERICAN COMMITTEE FOR THE WEIZMANN INSTITUTE OF SCIENCE - 633 THIRD AVENUE, 20TH FLOOR - NEW YORK, NY 10017	13-1623886	501(C)3	25,200.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
AMERICAN FRIENDS OF HEBREW UNIVERSITY - 1930 HARRISON STREET SUITE 201 - HOLLYWOOD, FL 33020	13-1568923	501(C)3	25,200.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
AMERICANS FOR BEN-GURION UNIVERSITY INC - 1001 AVENUE OF THE AMERICAS, 19TH FLOOR - NEW YORK, NY 10018	23-7270753	501(C)3	25,200.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHAMPIONS 4 CHILDREN INC. 14250 ROYAL HARBOUR CT UNIT 914 FORT MYERS, FL 33908	81-1114307	501(C)3	25,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CONGREGATION OF DIVINE PROVIDENCE 5300 ST. ANNE DRIVE MELBOURNE, KY 41059	61-0449660	501(C)3	25,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
GRACE CHRISTIAN CHURCH OF SCOTT COUNTY INC - 1648 LEXINGTON RD - GEORGETOWN, KY 40324	61-1162799	501(C)3	25,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ST. LUKE CHURCH 2351 ALUMNI DRIVE LEXINGTON, KY 40517	61-0945448	501(C)3	25,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
WASHINGTON AND LEE UNIVERSITY DEVELOPMENT BUILDING 204 WEST WASHINGTON STREET - LEXINGTON, VA 24450-2554	54-0505977	501(C)3	25,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
THE SALVATION ARMY - SCOTT COUNTY SERVICE CENTER - 100 WASHINGTON SQUARE - GEORGETOWN, KY 40324	58-0660607	501(C)3	25,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
KOSAIR CHARITIES COMMITTEE, INC. 982 EASTERN PARKWAY LOUISVILLE, KY 40217	61-0514703	501(C)3	25,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
PRESTONWOOD CHRISTIAN ACADEMY 6801 WEST PARK BLVD. PLANO, TX 75093	75-2707809	501(C)3	25,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
SAINT JOSEPH HOSPITAL FOUNDATION 1451 HARRODSBURG ROAD SUITE D-308 LEXINGTON, KY 40504	61-1159649	501(C)3	25,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHRISTOPHER 2X GAME CHANGERS INC. 1800 MUHAMMAD ALI BLVD, STE 2D2 LOUISVILLE, KY 40203	83-0655030	501(C)3	25,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
KVC BEHAVIORAL HEALTHCARE KENTUCKY 2250 THUNDERSTICK DR., SUITE 1104 LEXINGTON, KY 40505	27-0795565	501(C)3	25,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
MENTORS AND MEALS 160 LEXINGTON ST VERSAILLES, KY 40383	47-5354733	501(C)3	24,941.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CARNEGIE CENTER FOR LITERACY AND LEARNING - 251 WEST SECOND STREET - LEXINGTON, KY 40507	61-1185631	501(C)3	24,550.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LIVING ARTS AND SCIENCE CENTER 362 N. MARTIN LUTHER KING BLVD. LEXINGTON, KY 40508	61-0675663	501(C)3	23,969.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
WINCHESTER CLARK COUNTY HERITAGE COMMISSION - 28 BECKNER STREET - WINCHESTER, KY 40391	61-0900865	501(C)3	23,608.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
HABITAT FOR HUMANITY OF MADISON AND CLARK COUNTIES - PO BOX 186 - RICHMOND, KY 40476-0186	61-1205778	501(C)3	23,583.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
COMMERCE LEXINGTON INC. 330 EAST MAIN STREET, SUITE 100 LEXINGTON, KY 40507-1525	61-0258800	501(C)3	23,510.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LEXINGTON SCHOOL INC 1050 LANE ALLEN ROAD LEXINGTON, KY 40504	61-0563291	501(C)3	23,325.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KENTUCKY EDUCATIONAL TELEVISION FOUNDATION INC - 560 COOPER DRIVE - LEXINGTON, KY 40502-2296	61-0722558	501(C)3	23,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ROSE MARY C. BROOKS PLACE 200 ROSE MARY DRIVE WINCHESTER, KY 40391	61-1370614	501(C)3	22,995.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CAMP HORSIN' AROUND 1159 CLAUNCH RD PERRYVILLE, KY 40468	76-0714967	501(C)3	22,713.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
MUSTARD SEED COMMUNITIES 29 JANES AVENUE MEDFIELD, MA 02052	58-1657207	501(C)3	22,500.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
MIDWAY UNIVERSITY OFFICE OF ADVANCEMENT 512 EAST STEP MIDWAY, KY 40347	61-0444708	501(C)3	22,500.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ST. JUDE CHILDREN'S RESEARCH HOSPITAL - 501 ST. JUDE PLACE - MEMPHIS, TN 38105	62-0646012	501(C)3	22,497.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
MOREHEAD THEATRE GUILD P.O. BOX 256 MOREHEAD, KY 40351	61-1197730	501(C)3	22,333.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CATHOLIC EDUCATION OPPORTUNITIES FOUNDATION - 444 LEWIS HARGETT CIRCLE STE. 125 - LEXINGTON, KY 40503	83-0910844	501(C)3	22,213.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
SEEDLEAF 714 N LIMESTONE ST LEXINGTON, KY 40508	45-0582109	501(C)3	22,114.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLARK COUNTY YOUTH SPORTS ASSOCIATION - 15 REDWING DRIVE - WINCHESTER, KY 40391	83-4632390	501(C)3	21,898.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ITNBLUEGRASS 219 E SHORT ST LEXINGTON, KY 40507	26-1341780	501(C)3	21,850.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
HARRISON MEMORIAL HOSPITAL 1210 KY HIGHWAY 36 EAST CYNTHIANA, KY 41031	61-0420440	501(C)3	21,775.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
UNIVERSITY OF THE CUMBERLANDS FINANCIAL AID OFFICE 6190 COLLEGE STATION DRIVE - WILLIAMSBURG, KY 40769-137	61-0470593	501(C)3	21,600.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
RED OAKS CENTER FOR NATURE AND THE ARTS, INC. - 574 NINA RIDGE RD - LANCASTER, KY 40444	82-2119872	501(C)3	21,489.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LEXINGTON LEADERSHIP FOUNDATION PO BOX 54642 LEXINGTON, KY 40555	61-1359956	501(C)3	21,435.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
NEWTON'S ATTIC 4974 OLD VERSAILLES ROAD LEXINGTON, KY 40510-9756	52-2115824	501(C)3	21,112.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CRU / CAMPUS CRUSADE FOR CHRIST CONTRIBUTIONS PO BOX 628222 ORLANDO, FL 32862	95-6006173	501(C)3	21,103.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ONEIDA BAPTIST INSTITUTE P.O. BOX 67 ONEIDA, KY 40972-0067	61-0479627	501(C)3	20,955.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EASTERN KENTUCKY UNIVERSITY FOUNDATION - ATTN: CARRIE FOSTER 521 LANCASTER AVENUE CPO 19 - RICHMOND, KY 40475	61-1131682	501(C)3	20,912.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
FRIENDS OF PARKS AND RECREATION 15 WHEELER AVE WINCHESTER, KY 40391	85-3909990	501(C)3	20,200.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
DISTRICT 3 VOLUNTEER FIRE DEPARTMENT - 5625 ROYALTON ROAD - SALYERSVILLE, KY 41465	31-1550369	501(C)3	20,078.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
KAS CONSULTING, LLC 681 KENOVA TRACE LEXINGTON, KY 40511	83-3312548	501(C)3	20,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
HOLY FAMILY CHURCH 900 WINCHESTER AVE ASHLAND, KY 41101	61-1132894	501(C)3	20,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
NATIONAL CHRISTIAN FOUNDATION 150 SANCTUARY PKWY, SUITE 350 ALPHARETTA, GA 30009	30-0209280	501(C)3	20,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
BEYOND OUR WALLS AT BOWS MEETING PLACE - 2615 HARVEY AVE - NORTH CHARLESTON, SC 29405	33-1087506	501(C)3	20,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
PHILLIPS COLLECTION 1600 21ST STREET NW WASHINGTON, DC 20009	53-0204620	501(C)3	20,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LOUISVILLE CENTRAL COMMUNITY CENTER - 1300 W MUHAMMAD ALI BLVD - LOUISVILLE, KY 40203	61-0590743	501(C)3	20,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONSERVANCY OF SOUTHWEST FLORIDA 1495 SMITH PRESERVE WAY NAPLES, FL 34102	59-1157084	501(C)3	20,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
FIRST CHURCH OF GOD 2500 COLBY ROAD WINCHESTER, KY 40391		CHURCH	20,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
SOUTHSIDE CHURCH OF CHRIST 1533 NICHOLASVILLE RD LEXINGTON, KY 40503	61-1014061	501(C)3	20,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
THE CHURCH OF JESUS CHRIST OF LATTER-DAY SAINTS - 50 EAST NORTH TEMPLE, FLOOR 22 - SALT LAKE CITY, UT 84150	87-0234341	501(C)3	20,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
HOPE CENTER PO BOX 6 LEXINGTON, KY 40588	61-1107296	501(C)3	19,848.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
SWIMCHESTER SAILFISH C/O HEATH TUCKER 177 CASA LANDA WAY WINCHESTER, KY 40391	46-2793441	501(C)3	19,690.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
FAMILY SERVICES ASSOCIATION OF BOYLE COUNTY - 447 SOUTH 3RD STREET - DANVILLE, KY 40422	61-0458751	501(C)3	19,595.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LEXINGTON AREA PARKINSON DISEASE SUPPORT GROUP - PO BOX 4424 - LEXINGTON, KY 40544-4424	61-1308517	501(C)3	19,521.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
COMMUNITY AND TECHNICAL COLLEGE FOUNDATION OF ASHLAND INC - 1400 COLLEGE DRIVE - ASHLAND, KY 41101	61-1274401	501(C)3	19,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY OF FRANKFORT, KY 800 LOUISVILLE ROAD FRANKFORT, KY 40601		GOVERNMENT	18,956.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
WOODS AND WATERS LAND TRUST 306 W MAIN ST STE 602 FRANKFORT, KY 40601	26-1340083	501(C)3	18,704.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
PARTNERS IN EDUCATION OF CLARK COUNTY INC. - 620 BOONE AVE - WINCHESTER, KY 40391	27-5436682	501(C)3	18,588.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
BLUEGRASS GREENSOURCE 1305 GERMANY RD FRANKFORT, KY 40601	61-1395175	501(C)3	18,313.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
KENTUCKY UNITED METHODIST CHILDREN'S HOMES - PO BOX 930 - NICHOLASVILLE, KY 40340	61-0458375	501(C)3	17,847.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CHARLIE'S HEART CHARITY 41 DAMON COURT WINCHESTER, KY 40391	84-4793525	501(C)3	17,678.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
UNIVERSITY OF KENTUCKY HEALTHCARE - KENTUCKY CHILDREN'S HOSPITAL - OFFICE OF PHILANTHROPY PO BOX 34184 - LEXINGTON, KY 40588	61-6001218	501(C)3	17,500.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
KENTUCKY NATURAL LANDS TRUST 433 CHESTNUT STREET BEREA, KY 40403	61-1276913	501(C)3	17,496.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
MIDDLE FORK VOLUNTEER FIRE DEPT. PO BOX 433 SALYERSVILLE, KY 41465	14-1903983	501(C)3	16,934.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WINCHESTER COMMUNITY WORK GROUP 111 ASHLAND AVE WINCHESTER, KY 40391	84-1157651	501(C)3	16,576.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
MADISON COUNTY PUBLIC LIBRARY 507 WEST MAIN STREET RICHMOND, KY 40475	61-1158963	501(C)3	16,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
WINCHESTER-CLARK COUNTY PARKS AND RECREATION - 15 WHEELER AVENUE - WINCHESTER, KY 40391		GOVERNMENT	15,965.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
NORTH MAGOFFIN VOLUNTEER FIRE DEPARTMENT - 4845 COON CREEK ROAD - SALYERSVILLE, KY 41465	61-1401482	501(C)3	15,770.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CLEAR CREEK BAPTIST BIBLE COLLEGE DEVELOPMENT OFFICE 300 CLEAR CREEK PINEVILLE, KY 40977	61-6002351	501(C)3	15,565.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
BABY HEALTH SERVICE, INC. 1401 HARRODSBURG ROAD SUITE A-420 LEXINGTON, KY 40504	61-0518017	501(C)3	15,029.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
PISGAH PRESBYTERIAN CHURCH 710 PISGAH PIKE VERSAILLES, KY 40383		CHURCH	15,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
NIAGARA UNITED METHODIST CHURCH C/O JANICE FISHER 760 BARREN CHURCH ROAD SOUTH - HENDERSON, KY 42420		CHURCH	15,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
RUAH WOODS 6675 WESSELMAN RD. CINCINNATI, OH 45248	26-2221421	501(C)3	15,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MARAFIKI CENTER 857 SPARTA CT, STE A LEXINGTON, KY 40504	85-2826539	501(C)3	15,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
HARPETH HALL SCHOOL 3801 HOBBS ROAD NASHVILLE, TN 37215	62-0501916	501(C)3	15,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
BLUE GRASS COUNCIL BOY SCOUTS OF AMERICA - BSA-204 2134 NICHOLASVILLE ROAD SUITES 3 AND 4 - LEXINGTON, KY 40503	61-0444653	501(C)3	14,997.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
SALYERSVILLE VOLUNTEER FIRE DEPARTMENT - PO BOX 640 - SALYERSVILLE, KY 41465	61-1320260	501(C)3	14,939.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
THE AVIATION MUSEUM OF KENTUCKY 4029 AIRPORT ROAD, SUITE 100 LEXINGTON, KY 40510	31-1028870	501(C)3	14,551.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
KENTUCKY STATE TREASURER 300 SOWER BLVD., 4TH FLOOR FRANKFORT, KY 40601		GOVERNMENT	14,231.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
NEW OPPORTUNITY SCHOOL FOR WOMEN, INC - 204 CHESTNUT STREET - BEREA, KY 40403	61-1323868	501(C)3	14,197.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CALVARY BAPTIST CHURCH 150 E. HIGH STREET LEXINGTON, KY 40507		CHURCH	14,133.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
KENTUCKY RESOURCES COUNCIL, INC. PO BOX 1070 FRANKFORT, KY 40602	31-1042931	501(C)3	14,026.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AVOL KENTUCKY, INC. 1824 HILL RISE DR STE 100 LEXINGTON, KY 40504	61-1149457	501(C)3	14,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ST. PETER CATHOLIC CHURCH 125 BARR ST LEXINGTON, KY 40507		CHURCH	13,733.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CHILDREN'S ADVOCACY CENTER OF THE BLUEGRASS, INC. - 162 N. ASHLAND AVENUE - LEXINGTON, KY 40502	61-1221470	501(C)3	13,470.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
AMERICA-ISRAEL CULTURAL FOUNDATION 178 COLUMBUS AVENUE P.O. BOX 237133 NEW YORK, NY 10023	13-1664048	501(C)3	13,200.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
BROKE SPOKE COMMUNITY BIKE SHOP INC - 501 WEST SIXTH STREET, SUITE 130 - LEXINGTON, KY 40508	27-3933001	501(C)3	12,793.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LEXINGTON WOMAN'S CLUB 120 EDGEMOOR DR LEXINGTON, KY 40503	61-6025946	501(C)3	12,604.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
GENESIS FOUNDATION OF KENTUCKY INC 37 N HIGHLAND ST WINCHESTER, KY 40391	47-3416348	501(C)3	12,400.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
FRIENDS AND VETS HELPING PETS PO BOX 910117 LEXINGTON, KY 40591	45-3113935	501(C)3	12,397.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
SPHINK ACADEMY 1591 WINCHESTER ROAD, SUITE 101 LEXINGTON, KY 40505	47-3487919	501(C)3	12,098.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CREATIVE AGENTS OF CHANGE FOUNDATION D/B/A IDEAS XLAB - C/O HANNAH DRAKE 100 E GARRETT ST - LOUISVILLE, KY 40214	46-3469821	501(C)3	12,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
VIPASSANA COMMUNITY FOUNDATION 411 PIGEON SPRINGS RD ONALASKA, WA 98570	26-3577879	501(C)3	12,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ALABAMA WILDLIFE FEDERATION INC 3050 LANARK RD MILLBROOK, AL 36054	63-0496911	501(C)3	11,897.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
THE GOVERNOR'S SCHOLARS PROGRAM FOUNDATION, INC. - 112 CONSUMER LANE - FRANKFORT, KY 40601	61-1393028	501(C)3	11,818.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
SPARK COMMUNITY CAFE 175 N MAIN ST VERSAILLES, KY 40383	82-1517160	501(C)3	11,708.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
FAYETTE COUNTY BAR ASSOCIATION 110 W VINE ST STE 415 LEXINGTON, KY 40507	23-7090276	501(C)3	11,550.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ASHLAND TERRACE 475 SOUTH ASHLAND AVENUE LEXINGTON, KY 40502	23-7082862	501(C)3	11,536.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
MARY QUEEN OF THE HOLY ROSARY SCHOOL - 605 HILL-N-DALE DRIVE - LEXINGTON, KY 40503-2116		SCHOOL	11,500.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
DISABLED AMERICAN VETERANS - SALYERSVILLE - PO BOX 277 - SALYERSVILLE, KY 41465	31-1024053	501(C)3	11,315.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TREES LEXINGTON INC. PO BOX 1046 LEXINGTON, KY 40588	82-1288472	501(C)3	11,045.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
AMERICAN CIVIL LIBERTIES UNION OF KENTUCKY FOUNDATION, INC. - 325 W MAIN ST, STE 2210 - LOUISVILLE, KY 40202	61-6058569	501(C)3	11,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
THE MATTHEW 1914 PROJECT PO BOX 9272 PHOENIX, AZ 85068	84-4023923	501(C)3	11,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
HOPE SPAY NEUTER CLINIC PO BOX 23 VERSAILLES, KY 40383	27-0913082	501(C)3	10,979.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
FIRST PRESBYTERIAN CHURCH 171 MARKET STREET LEXINGTON, KY 40507		CHURCH	10,971.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ARTS COMMISSION OF DANVILLE/BOYLE COUNTY - 105 EAST WALNUT FISHER'S ROW 1 IN CONSTITUTION SQUARE - DANVILLE, KY 40422	61-1335123	501(C)3	10,963.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
A CHANCE TO DANCE 1250 PARIS PIKE GEORGETOWN, KY 40324	81-4348004	501(C)3	10,916.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
HOSPICE EAST, INC. 407 SHOPPERS DRIVE WINCHESTER, KY 40391	61-0993839	501(C)3	10,886.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
WOODFORD COUNTY THEATRICAL ARTS ASSOCIATION - 275 BEASLEY RD - VERSAILLES, KY 40383	61-1143572	501(C)3	10,815.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN JEWISH JOINT DISTRIBUTION COMMITTEE - 220 E. 42ND STREET, ROOM 400 - NEW YORK, NY 10017-5833	13-1656634	501(C)3	10,800.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
AMERICAN FRIENDS OF THE ISRAEL MUSEUM - 545 FIFTH AVENUE SUITE 920 - NEW YORK, NY 10017	23-7182582	501(C)3	10,800.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
BLUEGRASS COMMUNITY AND TECHNICAL COLLEGE FOUNDATION, INC. - 500 NEWTOWN PIKE - LEXINGTON, KY 40508	76-0826082	501(C)3	10,600.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CHURCH OF THE GOOD SHEPHERD 533 EAST MAIN STREET LEXINGTON, KY 40508	61-6030578	501(C)3	10,600.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
THE POST CLINIC, INC. 35 STERLING AVENUE MT. STERLING, KY 40353	31-1515325	501(C)3	10,421.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
NEIGHBORS HELPING NEIGHBORS INC. 2516 CARTER AVE ASHLAND, KY 41101	61-1450110	501(C)3	10,374.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
COMMUNITY ASSISTANCE AND REFERRAL SERVICE (CARES) - 2516 CARTER AVENUE - ASHLAND, KY 41101	61-1255918	501(C)3	10,374.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
APPALRED LEGAL AID 114 N 3RD ST RICHMOND, KY 40475	61-0848948	501(C)3	10,292.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
GREEN FORESTS WORK 730 ROSE STREET LEXINGTON, KY 40546	46-1296612	501(C)3	10,262.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ZAM FORWARD C/O STEPHEN KINES 4995 SOARING TOP LENOIR, NC 28645	99-2517799	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
MAUI HUMANE SOCIETY PO BOX 1047 PUUNENE, HI 96784	99-6000953	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
THE HUMANE SOCIETY OF OLDHAM COUNTY INC - 2601 INTERIOR WAY - LA GRANGE, KY 40031	61-1166840	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
THE PRESBYTERIAN CHURCH OF DANVILLE - 500 WEST MAIN STREET - DANVILLE, KY 40422	61-0587173	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
DANVILLE HIGH SCHOOL 203 E LEXINGTON AVE DANVILLE, KY 40422-1519	61-6001399	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
HAPPY FEET EQUALS LEARNING FEET PO BOX 1742 DANVILLE, KY 40423	45-5231361	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CATHEDRAL OF CHRIST THE KING ATTN: BUSINESS MANAGER 299 COLONY B LEXINGTON, KY 40502	61-1132894	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CENTRO LATINO DE DANVILLE/BOYLE 225 W WALNUT ST. DANVILLE, KY 40422	26-3668416	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CHRISTIAN STUDENT FELLOWSHIP INC. 507 COLUMBIA AVENUE LEXINGTON, KY 40508	61-0711889	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GEORGETOWN COLLEGE OFFICE OF ADVANCEMENT 400 EAST COLLEGE STREET - GEORGETOWN, KY 40324	61-0444695	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
SPALDING UNIVERSITY OFFICE OF ADVANCEMENT 845 S THIRD S LOUISVILLE, KY 40203	61-0444780	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
FRANCISCAN UNIVERSITY OF STEUBENVILLE - OFFICE OF ADVANCEMENT 1235 UNIVERSITY BLVD - STEUBENVILLE, OH 43952	34-0714818	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
KIDS MAKEIT INC ATTN: JARIA GORDON 2812 WEBSTER AV SAN DIEGO, CA 92113	86-3449880	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
FRIENDS OF THE ISRAEL DEFENSE FORCES - C/O BRIAN SARRIN 8139 SANTOLO COVE COURT - BOYNTON BEACH, FL 33473	13-3156445	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
THE LEXINGTON DREAM FACTORY PO BOX 707 LEXINGTON, KY 40588	31-1009812	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
BLUEGRASS LAND CONSERVANCY 450 OLD VINE ST., STE 200 LEXINGTON, KY 40507	61-1293032	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
THISTLE FARMS, INC. ATTN: DEVELOPMENT DIRECTOR 5122 CHARLOTTE PIKE - NASHVILLE, TN 37209	58-2050089	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
INTERNATIONAL RESCUE COMMITTEE 122 EAST 42ND ST NEW YORK, NY 10168	13-5660870	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DIVINE PROVIDENCE INC DBA CATHOLIC ACTION CENTER - PO BOX 324 - LEXINGTON, KY 40588-0324	20-1895043	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
JOBS FOR KENTUCKY'S GRADUATES 2365 HARRODSBURG ROAD SUITE B330 LEXINGTON, KY 40504	46-4660829	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
RIVER FIELDS, INC. 1201 STORY AVENUE, SUITE 215 LOUISVILLE, KY 40206	61-6032501	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
WORLD CENTRAL KITCHEN 200 MASSACHUSETTS AVE NW, 7TH FLOOR WASHINGTON, DC 20001	27-3521132	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
WATERFRONT BOTANICAL GARDENS PO BOX 5056 LOUISVILLE, KY 40255	61-1297238	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
HEART MATH TUTORING INC PO BOX 30623 CHARLOTTE, NC 28230-0623	46-4366030	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
SIGMA CHI FOUNDATION 1714 HINMAN AVENUE EVANSTON, IL 60201	36-2208386	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
NEW HOPE FOOD PANTRY 310 YOUNG DRIVE STANFORD, KY 40484	46-4518416	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
BOYLE COUNTY SCHOOLS BOARD OF EDUCATION - 101 CITATION WAY SUITE C - DANVILLE, KY 40422	61-6001269	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MARKLUND CHILDRENS HOME 1S450 WYATT DR GENEVA, IL 60134	36-2652532	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ALICE LLOYD COLLEGE OFFICE OF FINANCIAL AID 100 PURPOSE ROAD - PIPPA PASSES, KY 41844	61-0492351	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
GLENDALE CHRISTIAN CHURCH 119 W MAIN STREET GLENDALE, KY 42740		CHURCH	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
THE FOSTER CARE COUNCIL OF LEXKY 2121 RICHMOND RD STE 105 LEXINGTON, KY 40502	45-4403520	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
FOLDS OF HONOR FOUNDATION DEPARTMENT #13 TULSA, OK 74182	75-3240683	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
KENTUCKY HISTORICAL SOCIETY FOUNDATION - PO BOX 6856 - FRANKFORT, KY 40602	61-1204590	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CHRISTIAN APPALACHIAN PROJECT CAP DEVELOPMENT OFFICE PO BOX 55911 LEXINGTON, KY 40555-5911	61-0661137	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
GLOBAL EMPOWERMENT MISSION 1850 NW 84TH AVE SUITE 100 DORAL, FL 33126	45-3782061	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
OUTRIGHT INTERNATIONAL 216 EAST 45TH STREET, 17TH FLOOR NEW YORK, NY 10017	94-3139952	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLEMSON UNIVERSITY FOUNDATION ANNUAL GIVING OFFICE PO BOX 1889 CLEMSON, SC 29633-1889	57-0426335	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CAROLINA COONHOUND RESCUE PO BOX 80223 CHARLESTON, SC 29416	80-0611301	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
THE ARBORETUM 500 ALUMNI DRIVE LEXINGTON, KY 40503		GOVERNMENT	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ONE WORLD HEALTH 21 GAMECOCK AVE # D CHARLESTON, SC 29407	26-3717278	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
PONTOTOC ANIMAL WELFARE SOCIETY 1200 SANDY CREEK DR ADA, OK 74820	73-1157284	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
PARIS-BOURBON COUNTY YMCA 917 MAIN STREET PARIS, KY 40361	61-0676727	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
WE ARE FAMILY 1801 REYNOLDS AVE UNIT B NORTH CHARLESTON, SC 29405	57-1008020	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
JEWISH FEDERATION OF PALM BEACH COUNTY - 1 HARVARD CIRCLE, SUITE 100 - WEST PALM BEACH, FL 33409	59-0948696	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
FIRST BAPTIST CHURCH 749 S WINTERGARDEN RD BOWLING GREEN, OH 43402		CHURCH	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST. JOSEPH CATHOLIC CHURCH 248 SOUTH MAIN STREET WINCHESTER, KY 40391		CHURCH	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
RAMEY BRANCH GOSPEL CHURCH PO BOX 803 PAINTSVILLE, KY 41240		CHURCH	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LOWCOUNTRY ORPHAN RELIEF PO BOX 70185 N. CHARLESTON, SC 29415	26-1108081	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CHRIST EVANGELICAL LUTHERAN CHURCH PO BOX 364 BOWLING GREEN, OH 43402	34-1248947	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
GRACE BAPTIST CHURCH INC OF WINCHESTER KY - 5990 LEXINGTON RD - WINCHESTER, KY 40391	61-1221189	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LIBERTY HALL HISTORIC SITE 202 WILKINSON STREET FRANKFORT, KY 40601	61-6029757	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
JEWISH UNITED FUND OF CHICAGO 30 S. WELLS STREET CHICAGO, IL 60606	36-2167034	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
15-10 FOUNDATION 713 BIGLEY AVE. CHARLESTON, WV 25302	87-2380864	501(C)3	10,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
RADIO EYE 1733 RUSSELL CAVE ROAD LEXINGTON, KY 40505	61-1148801	501(C)3	9,984.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAMP YOUNG JUDAEA MIDWEST 4411 NORTH RAVENSWOOD AVE. SUITE 30 CHICAGO, IL 60640	39-1672846	501(C)3	9,901.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
SURGERY ON SUNDAY, INC. 1594 HARRODSBURG ROAD LEXINGTON, KY 40504	20-3187452	501(C)3	9,865.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
PLANNED PARENTHOOD GREAT NORTHWEST, HI, AK, IN, KY - 2001 E MADISON ST - SEATTLE, WA 98122	91-0686012	501(C)3	9,807.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
SAYRE CHRISTIAN VILLAGE NURSING HOME, INC. - 3775 BELLEAU WOOD DR - LEXINGTON, KY 40517	61-0937079	501(C)3	9,772.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LFUCG DIVISION OF FAMILY SERVICES FAMILY CARE CENTER FACILITY 1135 HARRY SYKES WAY - LEXINGTON, KY 40504		GOVERNMENT	9,568.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
MD ANDERSON CANCER CENTER PO BOX 4486 HOUSTON, TX 77210	76-0300816	501(C)3	9,168.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ST. CLAIRE HOSPICE AND PALLIATIVE CARE - 222 MEDICAL CIRCLE - MOREHEAD, KY 40351	61-0605336	501(C)3	9,168.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
NATHANIEL MISSION 1109 VERSAILLES ROAD, SUITE 400 LEXINGTON, KY 40508	30-0303716	501(C)3	9,039.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
MOVEABLE FEAST LEXINGTON, INC. PO BOX 367 LEXINGTON, KY 40588-0367	31-1604759	501(C)3	8,986.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEXINGTON THEATRE COMPANY PO BOX 12067 LEXINGTON, KY 40580	46-4867178	501(C)3	8,768.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ARBOR YOUTH SERVICES PO BOX 904 LEXINGTON, KY 40588	61-0926861	501(C)3	8,632.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CENTRAL MUSIC ACADEMY 3295 EAGLE VIEW LANE LEXINGTON, KY 40509	61-1466695	501(C)3	8,419.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
EPHRAIM MCDOWELL HEALTH CARE FOUNDATION - 217 SOUTH THIRD STREET - DANVILLE, KY 40422	61-1229333	501(C)3	8,171.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
INTERNATIONAL BOOK PROJECT VAN METER BUILDING 1440 DELAWARE AV LEXINGTON, KY 40505	61-6039627	501(C)3	8,062.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ENRICH CORP C/O INDIA KIRSTEIN 229 RACHEL COURT RICHMOND, KY 40475	84-5062623	501(C)3	8,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
FEED FAYETTE EATING EDUCATION AND DELIVERY INC - 2406 HARRODS POINTE TRACE - LEXINGTON, KY 40514	83-4009257	501(C)3	7,969.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
PAWS 4 THE CAUSE 201 NEWTOWN PIKE LEXINGTON, KY 40508	26-4158122	501(C)3	7,869.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
HANDS HEALING HEARTS INC DBA YES ARTS - 317 W. 2ND ST. - FRANKFORT, KY 40601	83-1472092	501(C)3	7,867.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BEVP DBA BIRD'S EYE VIEW PROJECT C/O RYAN PARROTT 906 TWIN CREEKS DR ALLEN, TX 75013	47-4019107	501(C)3	7,866.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LEGAL AID OF THE BLUEGRASS 300 E MAIN ST STE 110 LEXINGTON, KY 40507	61-0668572	501(C)3	7,809.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LEXINGTON PRIDE CENTER 389 WALLER AVE STE 100 LEXINGTON, KY 40504	31-0994061	501(C)3	7,784.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
FAYETTE COOPERATING PRESCHOOL 109 ROSEMONT GARDEN LEXINGTON, KY 40503	23-7212696	501(C)3	7,684.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
BIA CARES 3146 CUSTER DRIVE LEXINGTON, KY 40517	45-2121371	501(C)3	7,558.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
THE PIARIST SCHOOL PO BOX 369 7279 S. KY RT. 321 HAGERHILL, KY 41222	61-1177865	501(C)3	7,500.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
UNITED STATES HOLOCAUST MEMORIAL MUSEUM - 100 RAOUL WALLENBERG PL, SW - WASHINGTON, DC 20024	52-1309391	501(C)3	7,500.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
KENTUCKY SCHOOL FOR THE DEAF CHARITABLE FOUNDATION - P.O. BOX 27 - DANVILLE, KY 40423	61-1091577	501(C)3	7,300.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
HARRODSBURG-MERCER COUNTY RECREATIONAL PARK BOARD - 1501 LOUISVILLE ROAD - HARRODSBURG, KY 40330	61-1279422	501(C)3	7,048.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
A CARING PLACE 1870 ARMSTRONG MILL ROAD LEXINGTON, KY 40517	84-3093905	501(C)3	7,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ALZHEIMER'S ASSOCIATION GREATER KENTUCKY AND SOUTHERN IN CHAPTER - LEXINGTON BLUEGRASS CHAPTER 2808 PALUMBO DR, STE 205 - LEXINGTON,	13-3039601	501(C)3	7,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
OPAL'S DREAM FOUNDATION PO BOX 581561 LOUISVILLE, KY 40268	90-0887035	501(C)3	7,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
THE HARSTAD FINE ARTS SERIES 1000 TATES CREEK RD LEXINGTON, KY 40502	81-0905880	501(C)3	6,992.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
SHELTER OF HOPE 2944 WINCHESTER AVENUE ASHLAND, KY 41101	61-1148320	501(C)3	6,916.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
BEREA UNITED METHODIST CHURCH 101 FEE STREET BEREA, KY 40403-1581	61-1006556	501(C)3	6,878.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
HENRY CLAY CENTER FOR STATESMANSHIP - BOX 210 838 E HIGH ST - LEXINGTON, KY 40502	47-2531773	501(C)3	6,876.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
VOICES OF HOPE- LEXINGTON INC. 450 OLD VINE ST STE 101 LEXINGTON, KY 40507	81-0821411	501(C)3	6,607.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
AMERICAN RED CROSS - BLUEGRASS AREA CHAPTER - 1450 NEWTOWN PIKE - LEXINGTON, KY 40511-1220	53-0196605	501(C)3	6,500.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF THE BLUEGRASS 651 PERIMETER DRIVE SUITE 510 LEXINGTON, KY 40517	61-0444679	501(C)3	6,500.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LEXINGTON HABITAT FOR HUMANITY 700 EAST LOUDON AVENUE LEXINGTON, KY 40505	61-1139529	501(C)3	6,500.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
AMERICAN CANCER SOCIETY - HOPE LODGE LEXINGTON - 1500 COLLEGE WAY - LEXINGTON, KY 40502	13-1788491	501(C)3	6,500.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
M'POWER RHYTHM 3010 BRECKENWOOD DR LEXINGTON, KY 40502	92-3293555	501(C)3	6,497.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
MAGOFFIN COUNTY RESCUE SQUAD PO BOX 155 200 EAST MAPLE STREET SALYERSVILLE, KY 41465	51-0151531	501(C)3	6,271.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
EASTERN KENTUCKY UNIVERSITY DEVELOPMENT OFFICE 521 LANCASTER AVENUE, CPO 19A - RICHMOND, KY 40475		SCHOOL	6,245.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
GLEANINGS HOUSING INC 286 MALABU CT. LEXINGTON, KY 40502	85-2640339	501(C)3	6,060.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
MICAHA LEGAL SERVICES, INC. 219 E SHORT ST #2 LEXINGTON, KY 40507	81-4791143	501(C)3	6,043.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
CASA DE LA CULTURA HISPANA DE LEXINGTON - 1008 PINE BLOOM DR. - LEXINGTON, KY 40504	46-5436195	501(C)3	6,026.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDS OF LEXINGTON SENIOR CENTER, INC. - 195 LIFE LANE - LEXINGTON, KY 40502	81-2573985	501(C)3	6,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LYRIC THEATRE AND CULTURAL ARTS CENTER - 300 EAST THIRD STREET - LEXINGTON, KY 40508	27-2608879	501(C)3	6,000.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ROWAN COUNTY FISCAL COURT 600 WEST MAIN STREET MOREHEAD, KY 40351		GOVERNMENT	5,965.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
FOSTERING GOODWILL PO BOX 54561 LEXINGTON, KY 40555	46-3264218	501(C)3	5,691.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
UNION COLLEGE BUSINESS OFFICE 310 COLLEGE STREET BARBOURVILLE, KY 40906	61-0461768	501(C)3	5,655.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
LIFE ADVENTURE CENTER OF THE BLUEGRASS - 570 MILNER ROAD - VERSAILLES, KY 40383	61-0461733	501(C)3	5,624.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
URBAN LEAGUE OF LEXINGTON-FAYETTE COUNTY - 148 DEWESE STREET - LEXINGTON, KY 40507	61-6054655	501(C)3	5,600.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
FUTBOL CLUB OF KENTUCKY INC. PO BOX 4444 WINCHESTER, KY 40392	20-1477810	501(C)3	5,536.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
WOODFORD HUMANE SOCIETY PO BOX 44 VERSAILLES, KY 40383	61-0992070	501(C)3	5,500.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STRATFORD SHAKESPEAREAN FESTIVAL OF AMERICA - 660 WOODWARD AVENUE 2290 FIRST NATIONAL BUILDING - DETROIT, MI 48226	38-2420887	501(C)3	5,500.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
BEAUMONT PRESBYTERIAN CHURCH 1070 LANE ALLEN RD. LEXINGTON, KY 40504		CHURCH	5,500.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
DV8 KITCHEN VOCATIONAL TRAINING FOUNDATION - 405 RIDGEWAY ROAD - LEXINGTON, KY 40502	82-2835051	501(C)3	5,465.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ASHLAND BLAZER HIGH SCHOOL 1500 BLAZER BLVD ASHLAND, KY 41102		SCHOOL	5,395.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
FRIENDS OF HUNTERTOWN COMMUNITY INTERPRETIVE PARK - 220 ROBERTS RD - VERSAILLES, KY 40383	87-4094446	501(C)3	5,385.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
ITTY BITTY KITTEN RESCUE INC 242 TAHOMA RD LEXINGTON, KY 40503	84-5031830	501(C)3	5,256.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
STS. PETER AND PAUL SCHOOL 423 WEST SHORT STREET LEXINGTON, KY 40507	61-1132894	501(C)3	5,225.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
SOUTH MAGOFFIN VOLUNTEER FIRE DEPARTMENT - 19380 SE LICKING RIVER RD. - SALYERSVILLE, KY 41465	38-3805794	501(C)3	5,174.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
SOUTH ALLEGHENY HIGH SCHOOL C/O JOSEPH ESPER 2743 WASHINGTON BL MCKEESPORT, PA 15133-2017		SCHOOL	5,145.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DERRY AREA HIGH SCHOOL C/O DR. CASEY LONG 982 CHESTNUT ST DERRY, PA 15627		SCHOOL	5,145.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
WILDLIFE RESOURCES DIVISION, GEORGIA DEPT. OF NATURAL RESOURCES - 2067 U.S. HIGHWAY 278 SE - SOCIAL CIRCLE, GA 30025-4711		GOVERNMENT	5,099.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION
IMAGINATION LIBRARY OF FRANKFORT 720 REED DR FANKFORT, KY 40601	87-2355218	501(C)3	5,083.	0.			TO FURTHER THE EXEMPT PURPOSE OF THE ORGANIZATION

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIP	222	526,061.	0.		

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

PART I, LINE 2:

ALL RECIPIENTS OF COMPETITIVE GRANTS ARE REQUIRED TO SUBMIT A GRANT REPORT AT THE END OF THE GRANT PERIOD, TYPICALLY ONE YEAR. GRANTEES ARE ASKED TO EVALUATE THE SUCCESS OF THEIR PROJECT. IF THE GRANT HAS BEEN INSTRUMENTAL IN ATTRACTING ADDITIONAL SUPPORT, TO PROVIDE INCOME AND EXPENSE INFORMATION INCLUDING WHETHER ALL GRANT DOLLARS WERE SPENT, FUTURE SUSTAINABILITY OF THE PROJECT, AND IF THERE WAS ANY VARIANCE IN THE PROJECT OR IN SPENDING. STAFF MEMBERS READ GRANT REPORTS, FILL OUT A GRANT REVIEW REPORT FORM, AND ATTACH THIS TO THE GRANT RECORD. GRANT COMMITTEES REVIEW A SUMMARY OF THE

Part IV Supplemental Information

PREVIOUS YEAR'S GRANT REPORTS BEFORE CONSIDERING FUNDING TO THE SAME AGENCIES. AGENCIES THAT DO NOT SUBMIT GRANT REPORTS ARE NOT ELIGIBLE TO RECEIVE FUNDING FROM COMPETITIVE GRANTS.

Multiple horizontal lines for supplemental information.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

BLUE GRASS COMMUNITY FOUNDATION, INC.

Employer identification number

61-6053466

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--------------------------------------------------------------------|----------------------------------------------------------------------------|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

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

Schedule J (Form 990) 2023

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) LISA ADKINS PRESIDENT/CEO	(i)	250,030.	0.	0.	25,003.	640.	275,673.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) BRIAN DINEEN VP OF FINANCE & ADMINISTRA	(i)	148,918.	5,000.	0.	16,491.	7,803.	178,212.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

BLUE GRASS COMMUNITY FOUNDATION, INC.

Employer identification number

61-6053466

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE BLUEGRASS REGION BY INCREASING CHARITABLE GIVING AND LEADING ON
CRITICAL COMMUNITY ISSUES.

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

THE FINAL FORM 990 AND SUPPLEMENTAL SCHEDULES ARE REVIEWED IN DETAIL BY THE
FINANCE AUDIT COMMITTEE OF THE BOARD. ONCE REVIEWED AND APPROVED BY THE
FINANCE AND AUDIT COMMITTEE, ALL BOARD MEMBERS ARE SENT AN EMAIL CONTAINING
A LINK TO A PASSWORD-PROTECTED COPY OF THE COMPLETE FORM 990. BOARD MEMBERS
ARE INFORMED THE PASSWORD-PROTECTED COPY IS AVAILABLE FOR REVIEW ON THE
FOUNDATION'S WEBSITE.

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

CONFLICT OF INTEREST STATEMENTS ARE UPDATED ANNUALLY AND REVIEWED BY SENIOR
MANAGEMENT OF THE COMMUNITY FOUNDATION. ANY CONFLICTS ARE NOTED AT THAT
TIME AS WELL AS CREATION OF A PLAN FOR MONITORING THE CONFLICT IF A
CONFLICT IS DETERMINED. PERSONS INVOLVED IN THE TRANSACTION INVOLVING A
CONFLICT ARE PROHIBITED FROM PARTICIPATION IN THE DELIBERATIONS AND
DECISIONS OF SUCH TRANSACTION.

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

COMPENSATION FOR THE COMMUNITY FOUNDATIONS CEO WAS RECOMMENDED BY THE
COMPENSATION COMMITTEE AND APPROVED BY THE EXECUTIVE COMMITTEE OF THE BOARD
OF DIRECTORS. COMPARATIVE DATA WAS USED FROM LOCAL AND NATIONAL SOURCES
AND THE PROCESS WAS DOCUMENTED IN THE MINUTES OF THE COMMITTEE MEETINGS AS
WELL AS IN THE EMPLOYMENT CONTRACT OF THE CEO. THE PROCESS WAS LAST

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

Schedule O (Form 990) 2023

LHA 332211 11-14-23

Name of the organization BLUE GRASS COMMUNITY FOUNDATION, INC.	Employer identification number 61-6053466
-------------------------------------------------------------------	----------------------------------------------

COMPLETED DURING THE CURRENT FISCAL YEAR.

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

MOST RECENT AUDITED FINANCIAL STATEMENTS ARE MADE AVAILABLE ON THE FOUNDATION'S WEBSITE. GOVERNING DOCUMENTS AND THE CONFLICT OF INTEREST POLICY ARE AVAILABLE FOR INSPECTION UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

SFAS 136 ADJUSTMENT	-3,145,523.
CHANGE IN VALUE OF CASH SURRENDER VALUE OF LIFE INSURANCE	-19,485.
TOTAL TO FORM 990, PART XI, LINE 9	-3,165,008.

FORM 990, PART XII, LINE 2C

THE OVERSIGHT OF THE AUDIT AND PROCESS USED TO SELECT AN INDEPENDENT ACCOUNTANT DID NOT CHANGE IN THE PRIOR YEAR.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization **BLUE GRASS COMMUNITY FOUNDATION, INC.** Employer identification number **61-6053466**

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
FOUR NINETY NINE EAST HIGH STREET, LLC - 46-1577439, 250 WEST MAIN STREET, LEXINGTON, KY 40507	REAL ESTATE HOLDING	KENTUCKY			

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
ROBERT L. BROWN FOUNDATION, INC. - 88-2334409, 499 E HIGH STREET SUITE 112, LEXINGTON, KY 40507	TO SUPPORT THE ROBERT L. BROWN FOUNDATION, INC.	KENTUCKY	501(C)	LINE 12A, I	BLUE GRASS COMMUNITY FOUNDATION	X	

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

Schedule R (Form 990) 2023

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

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

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

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

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

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) ROBERT L. BROWN FOUNDATION, INC.	B	612,512.	CASH
(2)			
(3)			
(4)			
(5)			
(6)			

