** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

A F	or the	2022 calendar year, or tax year beginning JUI	່ 1, 2022 and	ending J	UN 30, 2023					
	heck if pplicable	THE COMMUNITY FOUNDATION OF LOUISV	ILLE		D Employer ide	ntificat	tion number			
	_Addres									
	Name change	Doing business as			31-1140	889				
	□ Initial □ return □ Final □ return/	Number and street (or P.O. box if mail is not delived 325 W MAIN STREET	,	Room/suite 1110	E Telephone nu 502-585-4					
	termin- ated	City or town, state or province, country, and Z	IP or foreign postal code		G Gross receipts \$		48,398,012.			
	Ameno		3 1		H(a) Is this a gro	up retu	rn			
	Application	F Name and address of principal officer: RON GA	ALLO		for subordin	-				
	pendin	SAME AS C ABOVE			H(b) Are all subordina					
ΙT	ax-exe	empt status: X 501(c)(3) 501(c) ()	(insert no.) 4947(a)(1)	or 527	7 ` <i>'</i>		t. See instructions			
	Vebsit		(H(c) Group exem					
			ociation Other	L Year	of formation: 1985		State of legal domicile; KY			
		Summary		1 = 100.			state of regar dominers.			
	1	Briefly describe the organization's mission or most s	ignificant activities: TO MOB	ILIZE PE	OPLE, NETWORKS					
ce		AND CAPITAL TO SPARK MEANINGFUL CHANGE				-				
Governance	2	Check this box if the organization discont	inued its operations or dispo	sed of more	than 25% of its ne	t asset	S.			
ver	l	Number of voting members of the governing body (F				3	6			
	I	Number of independent voting members of the gove				4	6			
ა ა		Total number of individuals employed in calendar yea				5	0			
itie		Total number of volunteers (estimate if necessary)				6	6			
Activities &		Total unrelated business revenue from Part VIII, colu				7a	0.			
ď		Net unrelated business taxable income from Form 99				7b	0.			
					Prior Year		Current Year			
40	8	Contributions and grants (Part VIII, line 1h)			22,429,3	81.	16,559,467.			
ņ	9	D ' 'D 'L\''' 'C \				0.	0,			
Revenue	l	Investment income (Part VIII, column (A), lines 3, 4, a			397,9	11.	1,095,305.			
ď		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9				0.	0,			
	1	Total revenue - add lines 8 through 11 (must equal P			22,827,2	92.	17,654,772.			
	13	Grants and similar amounts paid (Part IX, column (A)	, lines 1-3)		18,005,5	50.	17,715,035.			
	l	Benefits paid to or for members (Part IX, column (A),				0.	0.			
S	45	Salaries, other compensation, employee benefits (Pa		0.		0,				
Expenses	16a	Professional fundraising fees (Part IX, column (A), lin				0.	0,			
<u>be</u>	b	Total fundraising expenses (Part IX, column (D), line		0.						
ũ	17	Other expenses (Part IX, column (A), lines 11a-11d, 1			512,6	57.	1,019,589.			
		Total expenses. Add lines 13-17 (must equal Part IX,			18,518,2	07.	18,734,624.			
	19	Revenue less expenses. Subtract line 18 from line 12			4,309,0	85.	-1,079,852.			
or	20 21 22			В	eginning of Current Y	ear	End of Year			
sets	20	Total assets (Part X, line 16)			31,052,8	96.	24,115,323.			
AS d B	21	Total liabilities (Part X, line 26)			6,195,9	05.	445,750.			
Feet	22	Net assets or fund balances. Subtract line 21 from lin	ne 20		24,856,9	91.	23,669,573.			
Pa	art II	Signature Block								
Unde	er pena	lties of perjury, I declare that I have examined this return, ir	ncluding accompanying schedule	s and statem	ents, and to the best	of my kn	nowledge and belief, it is			
true,	correc	t, and complete. Declaration of preparer (other than officer)	is based on all information of w	nich preparei	has any knowledge.					
Sigr		Signature of officer			Date					
Her	е	MATTHEW L. BACON, EXECUTIVE VICE PRESIDENT & CFO								
		Type or print name and title								
		Print/Type preparer's name	Preparer's signature		Date Chec	k] PTIN			
Paid	ı	AMY DOSIK				employed	P00890743			
Prep	arer	Firm's name CHERRY BEKAERT ADVISORY LLC			Firm's EIN	88	-2730877			
Use	Only	Firm's address 101 SOUTH 5TH STREET STE 21	100							
		LOUISVILLE, KY 40202			Phone no.	888-5	87-1719			
May	the IF	RS discuss this return with the preparer shown above	e? See instructions				X Yes No			

	990 (2022) DEPOSITORY, INC.	31-1140889	Page 2
Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		Х
1	Briefly describe the organization's mission:		
	TO MOBILIZE PEOPLE, NETWORKS, AND CAPITAL TO SPARK MEANINGFUL CHANGE		
	IN AND BEYOND LOUISVILLE. WE CONNECT COMMUNITY RESOURCES AND		
	RELATIONSHIPS TO RELEVANT CAUSES. THE FOUNDATION ADDRESSES A WIDE		_
	RANGE OF COMMUNITY ISSUES WITH A KEY PRIORITY TO ADVANCE RACIAL EQUITY		_
2	Did the organization undertake any significant program services during the year which were not listed on the		
_	prior Form 990 or 990-EZ?		res X No
	If "Yes," describe these new services on Schedule O.		103110
2			res X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?		res [A] NO
_	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as n		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others	s, the total expense	s, and
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 18,709,149. including grants of \$ 17,715,035.) (Revenue	e\$)
	DISTRIBUTE GRANTS AND CONTRIBUTIONS TO 501(C)(3) ORGANIZATIONS		
	QUALIFYING UNDER SECTION 509(A).		
			_
			_
46	(6.4	•	
4b	(Code:) (Expenses \$	e\$,
4c	(Code:) (Expenses \$ including grants of \$) (Revenu	e\$)
			_
			_
	011 (D. 11		
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 18,709,149.		

Form 990 (2022) DEPOSITORY, INC. Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	_
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_		
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
_	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		,,
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			_v
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		_v
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
_	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			,,
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			_v
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		Х
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	441.		x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			x
4	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
u	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	444		x
	Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	Tie		
'	the organization's separate of consolidated financial statements for the tax year include a footificte that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
100	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
ıza	Schedule D, Parts XI and XII	12a		x
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
~	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	_		
	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."			
	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	Х	

Form 990 (2022)

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	23	х	
24 a	Schedule J	23		
2 7 0	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	06		Х
27	controlled entity or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part II</i> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	26		
21	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			17
~4	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	32		х
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
-	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	"		
	Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	20	х	
Par	Note: All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	38	Λ	
	Check if Schedule O contains a response or note to any line in this Part V			
	Check is Confidence to Confidence of Fronto to drift into it tillot art v		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		.03	.40
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		

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

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2 a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b		
			3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule of		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	•			
	financial account in a foreign country (such as a bank account, securities account, or other financial account	ccount)?	4a		Х
b	If "Yes," enter the name of the foreign country				
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac		_		₩
		O	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction.		5b		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
oa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		60		x
h	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions.	one or gifts	6a		
D	and the state of t		6b		
7	Organizations that may receive deductible contributions under section 170(c).		OD		
и а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and serv	vices provided to the payor?	7a		х
	TO BE A STATE OF THE STATE OF T	noos provided to the payor:	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it wa				
ŭ	to file Form 8282?		7c		x
А	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	•	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7f		х
g	If the organization received a contribution of qualified intellectual property, did the organization file For		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the			
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? \dots		9b		
0	Section 501(c)(7) organizations. Enter:	1			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	4		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	-		
1	Section 501(c)(12) organizations. Enter:	1			
а	Gross income from members or shareholders	11a	-		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against	441			
0-	amounts due or received from them.)	11b	40-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1	12a		
ъ 3	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
a	Is the organization licensed to issue qualified health plans in more than one state?		13a		
а	Note: See the instructions for additional information the organization must report on Schedule O.		154		
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
-	organization is licensed to issue qualified health plans	13b			
С	Enter the amount of reserves on hand	13c			
4a			14a		х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		14b		
5	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner				
	excess parachute payment(s) during the year?		15		х
	If "Yes," see the instructions and file Form 4720, Schedule N.				
6	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		х
	If "Yes," complete Form 4720, Schedule O.				
7	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any act	ivities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes," complete Form 6069.				

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

Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision X of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Х 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? X 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe 12c Х on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 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? The organization's CEO, Executive Director, or top management official X 15a Х 15b Other officers or key employees of the organization 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 Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16h Section C. Disclosure KY List the states with which a copy of this Form 990 is required to be filed 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 X Upon request Another's website __ Other (explain on Schedule O) 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. State the name, address, and telephone number of the person who possesses the organization's books and records MATTHEW L. BACON - 502-585-4649 325 W. MAIN STREET, SUITE 1110, LOUISVILLE, KY 40202

DEPOSITORY INC. 31-1140889

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Form 990 (2022) DEPOSITORY, INC. 31-1 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.
- 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.

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

- List all of the organization's **former** 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.

(A) Name and title	(B) Average hours per	(do box	not c	Pos heck ss per	c) ition more rson i	l than o	one i an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer Officer	Key employee	Highest compensated All Signatural All Signatura All Signatural All Signatura A	Former (a	from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) RONALD GALLO	5.00									
PRESIDENT & CEO	45.00			Х				0.	311,423.	9,223.
(2) MATTHEW L. BACON	5.00									
VP & CFO	45.00			Х				0.	199,939.	18,779.
(3) HEATHER CASH	5.00									
VP, DEVELOPMENT & STEWARDSHIP	45.00			Х				0.	136,257.	13,866.
(4) RAMONA DALLUM	5.00									
VP, COMMUNITY ENGAGEMENT	45.00			Х				0.	116,167.	16,192.
(5) VALERIE SICKLES	5.00									
VP, COMMUNICATIONS & MARKETING	45.00			Х				0.	100,076.	8,334.
(6) ANNE MCKUNE	5.00									
VP, ADVANCEMENT	45.00			Х				0.	92,341.	15,160.
(7) MARY GRISSOM	5.00									
VP, COMMUNITY INVESTMENT	45.00			Х				0.	100,679.	16,189.
(8) STEPHANIE BATEMAN	1.00									
DIRECTOR	2.00	Х						0.	0.	0.
(9) CURT SCOTT	1.00									
DIRECTOR	2.00	Х						0.	0.	0.
(10) DAVID TACHAU	2.00									
BOARD CHAIR	4.10	Х		Х				0.	0.	0.
(11) ELIZABETH FUST	2.00									
BOARD VICE CHAIR	3.10	Х		Х				0.	0.	0.
(12) MICHAEL W. GOUGH	2.00									
BOARD TREASURER	4.00	Х		Х				0.	0.	0.
(13) DEBORAH B. WILLIAMS	2.00									
BOARD SECRETARY	4.10	Х		Х				0.	0.	0.
		1								

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DEPOSITORY, INC.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
(A) Name and title	(B) Average	e Position (do not check more than one			1		(D) Reportable	(E) Reportable	, [(F) Estimated			
	hours per week	box	, unle: cer ar	ss pe	rson i	is both	n an	compensation from	compensation from related	- 1		nount other	
	(list any	rector					the	organization	ns	com	pensa	ation	
	hours for related	Individual trustee or director	stee			Highest compensated employee		organization (W-2/1099-MISC/	(W-2/1099-MIS 1099-NEC)			om th anizat	
	organizations	al truste	onal tru		loyee	com per		1099-NEC)			an	d relat	ted
	below line)	ndividu	Institutional trustee	Officer	Key employee	Highest mploye	Former				orga	anizati	ions
			_		×	1 0							
		-											
									1 056	000		0.7	T.4.2
1b Subtotal c Total from continuation sheets to Part VII	Section A							0.	1,056,	0.		97,	743.
d Total (add lines 1b and 1c)								0.	1,056,	882.		97,	743.
Total number of individuals (including but no compensation from the organization								eceived more than \$100,	000 of reportable	Э			0
compensation from the organization												Yes	No
3 Did the organization list any former officer,			кеу е	empl	oye	e, or	hig	hest compensated emp	loyee on				
line 1a? If "Yes," complete Schedule J for so 4 For any individual listed on line 1a, is the su								ner compensation from t			3		Х
and related organizations greater than \$150											4	Х	
5 Did any person listed on line 1a receive or a	ccrue compen	nsati	on fr	rom	any	unre	elate	ed organization or individ	dual for services				
rendered to the organization? <i>If "Yes," com</i> Section B. Independent Contractors	plete Schedule	<u> </u>	or st	ıch <u>i</u>	pers	on					5		Х
Complete this table for your five highest cor	•	•							•	oensat	ion fro	om	
the organization. Report compensation for t (A)	he calendar ye	ar e	endir	ng w	ith c	or wi	thin 	the organization's tax y	ear.		((<u></u>	
Name and business	address	NO	NE					Description of s	ervices	C	ompe		n
										<u> </u>			
										I			
							\dashv						
2 Total number of independent contractors (in	•	 ot lir	nited	d to			ted	above) who received mo	ore than				
\$100,000 of compensation from the organiz	ation					0							

DEPOSITORY INC.

Form 990 (2022) DEPOSITORY

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (D) Related or exempt Unrelated Revenue excluded Total revenue from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c 328,737. d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above ... 16,230,730. 1f 8,063,557. g Noncash contributions included in lines 1a-1f 16,559,467. h Total. Add lines 1a-1f **Business Code** 2 a Program Service f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 1,013,270. 1,013,270. 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents 6b **b** Less: rental expenses ... c Rental income or (loss) 6c d Net rental income or (loss) (ii) Other (i) Securities 7 a Gross amount from sales of 7a 30,825,275. assets other than inventory **b** Less: cost or other basis 7b 30,743,240. Other Revenue and sales expenses 82,035. c Gain or (loss) 7c 82,035. 82,035. d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses 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 10a and allowances **b** Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** 11 a **d** All other revenue e Total. Add lines 11a-11d 1,095,305 17,654,772. 0. **12 Total revenue**. See instructions

Form 990 (2022)

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Page 9

DEPOSITORY, INC.

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 (C) Management and general expenses (D) (B) Do not include amounts reported on lines 6b. Total expenses Program service expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 17,715,035 17,715,035 and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 10 Payroll taxes Fees for services (nonemployees): Management а Legal Accounting Lobbying Professional fundraising services. See Part IV, line 17 25,475. Investment management fees 25,475. Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.) Advertising and promotion 12 Office expenses 13 Information technology 14 Royalties 15 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Payments to affiliates _____ 21 Depreciation, depletion, and amortization 22 23 Other expenses. Itemize expenses not covered 24 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.) EARNINGS DISTRIBUTED TO 994,114. 994,114. С d All other expenses 18,734,624, Total functional expenses. Add lines 1 through 24e 18,709,149 25,475 0. 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

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Form 990 (2022) Part X Balance Sheet

ı a	IL A	Balance Sheet					
		Check if Schedule O contains a response or n	note to	any line in this Part X	(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing			777,622.	1	491,174.
	2	Savings and temporary cash investments			11,757,109.	2	5,046,650.
	3	Pledges and grants receivable, net				3	1,500.
	4	Accounts receivable, net			3,322.	4	
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub					
		controlled entity or family member of any of the		· ·		5	
	6	Loans and other receivables from other disqu	alified				
		under section 4958(f)(1)), and persons describ		`		6	
s	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use				8	
As	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	ı	a			
	b	Less: accumulated depreciation				10c	
	11	Investments - publicly traded securities	16,519,279.	11	18,575,999.		
	12	Investments - other securities. See Part IV, line	1,995,564.	12	0.		
	13	Investments - program-related. See Part IV, lin		13			
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must ed			31,052,896.	16	24,115,323.
	17	Accounts payable and accrued expenses			40,823.	17	7,428.
	18	Grants payable			18		
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities		20			
	21	Escrow or custodial account liability. Complet				21	
S	22	Loans and other payables to any current or fo					
ij		trustee, key employee, creator or founder, sub	bstantia	al contributor, or 35%			
Liabilities		controlled entity or family member of any of the	nese pe	rsons		22	
Ë	23	Secured mortgages and notes payable to unre	elated	hird parties		23	
	24	Unsecured notes and loans payable to unrela	ted thi	d parties		24	
	25	Other liabilities (including federal income tax,	payabl	es to related third			
		parties, and other liabilities not included on lin	nes 17-	24). Complete Part X			
		of Schedule D			6,155,082.	25	438,322.
	26	Total liabilities. Add lines 17 through 25			6,195,905.	26	445,750.
		Organizations that follow FASB ASC 958, c	heck h	ere X			
ces		and complete lines 27, 28, 32, and 33.					
<u>a</u>	27	Net assets without donor restrictions			-1,430,145.	27	-1,484,779.
Ва	28	Net assets with donor restrictions		<u></u>	26,287,136.	28	25,154,352.
pur		Organizations that do not follow FASB ASC	958, 0	heck here			
Ę		and complete lines 29 through 33.					
Net Assets or Fund Balances	29	Capital stock or trust principal, or current fund	ds			29	
set	30	Paid-in or capital surplus, or land, building, or	equipr	nent fund		30	
t As	31	Retained earnings, endowment, accumulated				31	
Ne.	32	Total net assets or fund balances			24,856,991.	32	23,669,573.
	33	Total liabilities and net assets/fund balances			31,052,896.	33	24,115,323.

Form **990** (2022)

DEPOSITORY, INC.

Pa	TEXT 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	17	,654,	772.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	18	,734,	624.		
3	Revenue less expenses. Subtract line 2 from line 1	3	-1	,079,	852.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	24	,856,	991.		
5	Net unrealized gains (losses) on investments	5		-107,	,566.		
6	Donated services and use of facilities	6					
7							
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,						
	column (B))	10	23	,669,	573.		
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII				X		
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		2b	Х			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,					
	consolidated basis, or both:						
	Separate basis X Consolidated basis Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,					
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х			
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche						
За	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?		3a		х		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	ed audi	t				
	an audite annelain substant Cabadula O and describe annetana telepa te undergrande sudite		ماد ا				

Form **990** (2022)

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

THE COMMUNITY FOUNDATION OF LOUISVILLE

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

DEPOSITORY 31-1140889 TNC Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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

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

Sec	tion A. Public Support						
Caler	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	13,696,364.	20,020,869.	17,857,642.	22,429,381.	16,559,467.	90,563,723.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	13,696,364.	20,020,869.	17,857,642.	22,429,381.	16,559,467.	90,563,723.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						8,196,502.
	Public support. Subtract line 5 from line 4.						82,367,221.
Sec	tion B. Total Support						
Caler	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	13,696,364.	20,020,869.	17,857,642.	22,429,381.	16,559,467.	90,563,723.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	706,039.	685,214.	664,012.	526,408.	1,013,270.	3,594,943.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						94,158,666.
	Gross receipts from related activities,	· · · · · · · · · · · · · · · · · · ·				12	
	First 5 years. If the Form 990 is for the		st, second, third, f	ourth, or fifth tax y	ear as a section 50	01(c)(3)	
	organization, check this box and stor						
	tion C. Computation of Publi					44	97.49
	Public support percentage for 2022 (I					14	87.48 % 87.55 %
	Public support percentage from 2021					15	
	33 1/3% support test - 2022. If the c						
	stop here. The organization qualifies 33 1/3% support test - 2021. If the o						
	and stop here. The organization qual						
	10% -facts-and-circumstances test						
ı ı a		_					
			, , , , , , , , , , , , , , , , , , ,	DON AND SLOP HE	• LAPIAIII III FAIL	vi now the organiza	
	and if the organization meets the fact		n aualifies es e anul	hlichy supported or	rganization		
	meets the facts-and-circumstances te	st. The organizatio	•		-	7a and line 15 is 1	
b	meets the facts-and-circumstances te 10% -facts-and-circumstances test	est. The organization are constant organizations.	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is 1	
b	meets the facts-and-circumstances te	est. The organizations 2021. If the organic facts-and-circum	anization did not c stances test, chec	heck a box on line k this box and st e	13, 16a, 16b, or 1 op here. Explain ir	7a, and line 15 is 1 n Part VI how the	

Schedule A (Form 990) 2022 DEPOSITORY, INC. | 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.)

Sed	ction A. Public Support	siow, picase comp	oicte i art ii.j				
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	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 bus-						
_	iness under section 513						
4	Tax revenues levied for the organ- ization'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						
	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.)						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6	(a) 2010	(6) 2019	(6) 2020	(4) 2021	(6) 2022	(i) iotai
	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						
	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	J		,	•	() ()	· —
	check this box and stop here						
	ction C. Computation of Publi					 	
	Public support percentage for 2022 (li	, ,,,	•	column (f))		15	%
	Public support percentage from 2021					16	%
	ction D. Computation of Inves			. 10 1 (0)		14-1	
	Investment income percentage for 20					17	%
	Investment income percentage from 2					18	% 7 in
198	33 1/3% support tests - 2022. If the						
b	more than 33 1/3%, check this box ar 33 1/3% support tests - 2021. If the	organization did r	not check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	and
	line 18 is not more than 33 1/3%, che	ck this box and st	top here. The orga	anization qualifies a	as a publicly supp	orted organization	
20	Private foundation. If the organization	n did not check a	hox on line 14 19	a or 19h check th	nis hox and see in	structions	

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

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

		Vss	N-
		Yes	No
	1		
	2		
	3a		
	3b		
	3c		
	4a		
	4b		
	-W		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	9c		
	10a		
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DEPOSITORY, INC.

Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion 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		100	110
•	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	1		
2	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported	•		
~	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	, ,			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	2		
Sec	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations			
	tion of type it supporting organizations		Vaa	N ₂
_			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)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	_		
<u>Sac</u>	the supported organization(s). tion D. All Type III Supporting Organizations	1		
000	Ton B. All Type in 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?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	_		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
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? If "Yes," describe in Part VI the role the organization's			
<u> </u>	supported organizations played in this regard.	3		
Sec	tion 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))-		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction	ı <u>s).</u>	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		\vdash
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Ves." describe in Part VI the role played by the organization in this regard	3b		1

Sche	edule A (Form 990) 2022 DEPOSITORY, INC.			31-1140889	Page 6
	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organ	izations		
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on	Nov. 20, 1970 (explain ii	Part VI). See instr	uctions.
	All other Type III non-functionally integrated supporting organizations mus		•	,	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current (optiona	
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			
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current (optiona	
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			
е	Discount claimed for blockage or other factors				
	(explain in detail in Part VI):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d.	3			
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,				
	see instructions).	4			
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
_6	Multiply line 5 by 0.035.	6			
_7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	ion C - Distributable Amount			Current Y	ear
1	Adjusted net income for prior year (from Section A, line 8, column A)	1			
2	Enter 0.85 of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3			
4	Enter greater of line 2 or line 3.	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
	emergency temporary reduction (see instructions).	6			
7	Check here if the current year is the organization's first as a non-functional	ally integrate	ed Type III supporting org	ganization (see	

Schedule A (Form 990) 2022

instructions).

Sche	dule A (Form 990) 2022 DEPOSITORY, INC.				31-1140889	Page 7
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations _{(continu}	ıed)		
Secti	on D - Distributions				Current Y	'ear
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported				•
	organizations, in excess of income from activity			2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3		
4	Amounts paid to acquire exempt-use assets			4		
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5		
6	Other distributions (describe in Part VI). See instructions.	, , , , , , , , , , , , , , , , , , ,		6		
7	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which the	ne organization is responsive				
	(provide details in Part VI). See instructions.			8		
9	Distributable amount for 2022 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount			10		
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2022	ıs	(iii) Distributa Amount for	
1	Distributable amount for 2022 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2022 (reason-					
	able cause required - explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2022					
a	From 2017					
b	From 2018					
С	From 2019					
d	From 2020					
е	From 2021					
f	Total of lines 3a through 3e					
	Applied to underdistributions of prior years					
	Applied to 2022 distributable amount					
i	Carryover from 2017 not applied (see instructions)					
ī	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2022 from Section D,					
	line 7:					
а	Applied to underdistributions of prior years					
	Applied to 2022 distributable amount					
	Remainder. Subtract lines 4a and 4b from line 4.					
	Remaining underdistributions for years prior to 2022, 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 2022. Subtract lines 3h					
•	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2023. Add lines 3j					
•	and 4c.					
8	Breakdown of line 7:					
	Excess from 2018					
	Excess from 2019					
	Excess from 2020					
	Excess from 2021					
	Excess from 2022					
	LAGGGG HOTTI EULE					

Schedule A (Form 990) 2022

Schedule B

(Form 990)

Schedule of Contributors
Attach to Form 990 or Form 990-PF.

0000

2022

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-PF.
Go to www.irs.gov/Form990 for the latest information.

Name of the organization

THE COMMUNITY FOUNDATION OF LOUISVILLE

DEPOSITORY, INC.

Benchmark

31-1140889

Organization type (check one):						
Filers of	:	Section:				
Form 99	0 or 990-EZ	X 501(c)(3) (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 99	0-PF	501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
	•	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.				
General	Rule					
	-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
Special	Rules					
X	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.					
	year, contributions is checked, enter he purpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., applete any of the parts unless the General Rule applies to this organization because it received nonexclusively, etc., contributions totaling \$5,000 or more during the year				
answer "	No" on Part IV, line	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must 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 requirements of Schedule B (Form 990).				

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

Schedule B (Form 990) (2022)

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

Employer identification number

31-1140889

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a)	(b)	(c)	(d)
No1	Name, address, and ZIP + 4	Total contributions \$765,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$1,779,211.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ 476,840.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 4	Name, address, and ZIP + 4	* 900,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$1,490,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$650,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

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

Employer identification number
31-1140889

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
7		\$581,284.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
8		\$580,422.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
9		\$553,963.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
10		\$514,605.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
11_		\$500,000.	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Person Payroll Complete Part II for noncash contributions.

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

Employer identification number

31-1140889

Part II	Noncash Property (see instructions). Use duplicate copies of Par	t II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	STOCK/PROPERTY		
2			
		\$\$	11/16/22
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
Part I	STOCK/PROPERTY		
3	STOCK/ PROPERTY		
		\$	03/02/23
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	STOCK/PROPERTY		
7			
		\$\$	03/03/23
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	STOCK/PROPERTY		
8			
		\$\$	02/02/23
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	STOCK/PROPERTY		
9			
		\$\$553,963.	06/13/23
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	STOCK/PROPERTY		
10			

Employer identification number

Name of organization

	UNITY FOUNDATION OF LOUISVILLE RY, INC.				31-1140889
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	a) through (e) and the following line charitable, etc., contributions of \$1,00	ne entry. For ord	anizations	
a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Desc	ription of how gift is held
		(e) Transfer			
	Transferee's name, address, a	and ZIP + 4	Re	elationship of trai	nsferor to transferee
a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Desc	ription of how gift is held
Part I					
		(e) Transfer	of gift		
	Transferee's name, address, a	and ZIP + 4	Re	elationship of tran	nsferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Desc	ription of how gift is held
-					
	Transferee's name, address, a	(e) Transfer		elationship of trai	nsferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Desc	ription of how gift is held
		(e) Transfer	of gift		
	Transferee's name, address, a	and ZIP + 4	Re	elationship of tran	nsferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Inspection

Name of the organization

THE COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY, INC.

Employer identification number 31-1140889

Pai	TI Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		or Accounts. Complete if the
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	vriting that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's e	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ac	dvisors 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?		Yes No
Pai	t II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (for example, recreat	ion or education) Preservation o	f a historically important land area
	Protection of natural habitat	Preservation o	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization of the complete lines 2a through 2d if the organization of the complete lines 2a through 2d if the organization of the complete lines 2a through 2d if the complete lines 2a throu	ed conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		1 1
b			
	Number of conservation easements on a certified historic stru		2c
d	Number of conservation easements included in (c) acquired at		
	historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	e organization during the tax
	year		
4	Number of states where property subject to conservation ease	· · · · · · · · · · · · · · · · · · ·	
5	Does the organization have a written policy regarding the peri		
_	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and enforcing con	servation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handl	ling of violations, and enforcing conserva	ation easements during the year
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	(h)(4)(B)(i)
Ū	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation		
·	balance sheet, and include, if applicable, the text of the footnote	•	
	organization's accounting for conservation easements.		ionic that goodhood the
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures, or O	ther 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	3, not to report in its revenue statement a	and balance sheet works
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education, or research in for	urtherance of public
	service, provide in Part XIII the text of the footnote to its finance	cial statements that describes these iten	ns.
b	If the organization elected, as permitted under FASB ASC 958	3, 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 furt	herance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
	(m) 4		•
2	If the organization received or held works of art, historical trea	asures, or other similar assets for financia	al gain, provide
	the following amounts required to be reported under FASB AS		
а	Revenue included on Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		

		THE COMMUNI	ITY FOUNDATION	OF LOU	ISVILLE							
) (Form 990) 2022 DEPOSITORY							11408		Pag	ge 2
Pai	t III	Organizations Maintaining C	ollections of A	t, Hist	orical Tre	easures, or O	ther S	imilar Ass	sets	continu <u>'</u>	ed)	
3	Usin	g the organization's acquisition, accessi	on, and other record	ls, check	any of the	following that ma	ıke sign	ificant use of	its			
	colle	ction items (check all that apply):										
а		Public exhibition		d	Loan or exc	change program						
b		Scholarly research		e	Other							
С		Preservation for future generations										
4	Prov	ide a description of the organization's co	ollections and explai	n how th	ey further tl	ne organization's	exempt	purpose in F	Part XII	l.		
5	Durir	ng the year, did the organization solicit o	r receive donations	of art, his	storical trea	sures, or other si	milar as	sets				
	to be	e sold to raise funds rather than to be ma	aintained as part of t	he orgar	nization's co	ollection?				/es		No
Par	t IV	Escrow and Custodial Arran							IV. line	9. or		
		reported an amount on Form 990, Pai			J				,	-,		
1a	Is the	e organization an agent, trustee, custodi		diary for o	contribution	s or other assets	not inc	luded				
		orm 990, Part X?								es/		No
h		es," explain the arrangement in Part XIII										140
		55, explain the arrangement in rait Air	and complete the le	mownig t	abic.				Α	mount		
_	Pogi	nning balance						1c				
	-	nning balance						1d				
u		tions during the year										
e		ibutions during the year						1e				
f		ng balance										<u> </u>
		he organization include an amount on Fo					-			es/	H	No
Par	IT "Y6	es," explain the arrangement in Part XIII.	Check here if the ex	xplanatio	n nas been	provided on Part	: XIII					
rai	LV	Endowment Funds. Complete		1				Three weers b	aalt L	- \ Faur v	ooro b	
			(a) Current year	(a) F	Prior year	(c) Two years ba	ack (a)	Three years b	ack (e	e) Four y	ears ba	ack
1a	-	nning of year balance							_			
b	Cont	ributions										
С		nvestment earnings, gains, and losses							_			
d	Gran	ts or scholarships										
е	Othe	r expenditures for facilities										
	and	programs										
f	Adm	inistrative expenses										
g	End	of year balance										
2	Prov	ide the estimated percentage of the curr	rent year end baland	e (line 1ç	g, column (a	i)) held as:						
а	Boar	d designated or quasi-endowment		%								
b	Perm	nanent endowment	%									
С			%									
	The	percentages on lines 2a, 2b, and 2c sho	uld equal 100%.									
За	Are t	here endowment funds not in the posse	ssion of the organiz	ation tha	t are held a	nd administered t	for the					
		nization by:								Y	'es l	No
	(i) l	Jnrelated organizations								3a(i)		
		Related organizations								3a(ii)		
b	If "Ye	es" on line 3a(ii), are the related organiza	tions listed as requi	red on S	chedule R?				····	3b		
4		cribe in Part XIII the intended uses of the							L			_
	t VI	Land, Buildings, and Equipm		, willione i	arrao.							
		Complete if the organization answere		0. Part I\	/. line 11a S	See Form 990. Pa	ırt X. line	e 10.				
		Description of property	(a) Cost or o		i	i i		umulated	14) Book	value	
		2000 plot of property	basis (invest			(other)	` '	ciation	"	, DOOK	·uiuc	
10	Lana	<u> </u>	<u> </u>		2 2 3 1 0							
	Duile	l										

Schedule D (Form 990) 2022

e Other.

c Leasehold improvements d Equipment

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

31-1140889

DEPOSITORY, INC.

Part VII Investments - Other Securities. Complete if the organization answered "Yes" o	n 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	I-of-year market value
(1) Financial derivatives			•
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" o	n 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	I-of-vear market value
(1)	(5) 20011 14.10.0	(c) means a creation cost of circ	. or your market raids
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" o	n Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
<u>(9)</u>			
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" of		110 or 116 Coo Form 000 Dort V line 05	
(1) 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ni i onni 990, Fait IV, IIIle	THE OF THE SEE FORM 990, Part A, IIIIe 25.	(b) Book value
., , , , , , , , , , , , , , , , , , ,			(b) DOOK Value
(1) Federal income taxes (2) PAYABLE TO RELATED ORGANIZATION			438,322.
(3)			130,322,
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.)		438,322.
2 Liability for uncertain tax positions. In Part XIII, provide t	,		

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

X

Schedule D (Form 990) 2022 DEPOSITORY, INC.		31-1140889	Page 4
Part XI Reconciliation of Revenue per Audited Fina	ncial Statements With Revenue	per Return.	
Complete if the organization answered "Yes" on Form 99	0, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial state	tements	1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 1	2:		
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		
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. P.	art I, line 12.)	5	
Part XII Reconciliation of Expenses per Audited Fin		es per Return.	
Complete if the organization answered "Yes" on Form 99	0, Part IV, line 12a.		
		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 3, and 9; Part III, lines 4, and 9; Part IIII, lines 4, and 9; Part III, lines 4, and 9; Part	nes 1a and 4; Part IV, lines 1b and 2b; Pa	rt V, line 4; Part X, line 2; Part	XI,
lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part t	to provide any additional information.		
PART X, LINE 2:			
THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES U	UNDER SECTION 501(C)(3)		
OF THE INTERNAL REVENUE CODE (CODE). ADDITIONALLY,	THE FOUNDATION HAS		
BEEN DETERMINED BY THE INTERNAL REVENUE SERVICE NOT	TO BE A PRIVATE		
FOUNDATION WITHIN THE CONTEXT OF SECTION 509(A) OF T	HE CODE.		
WHEN APPLICABLE, THE FOUNDATION RECOGNIZES UNCERTAIN	I INCOME TAX POSITIONS		
USING THE "MORE-LIKELY-THAN-NOT" APPROACH AS DEFINED	O IN THE ASC. NO		
TIADILITAY DOD INJADDATAY TAY DOGTOOM TO THE TOTAL	ADED THE MILE		
LIABILITY FOR UNCERTAIN TAX POSITIONS HAS BEEN RECOR	DED IN THE		
AGGOVED NIVE NO GOVERN TEN TEN TEN TEN TEN TEN TEN TEN TEN TE			
ACCOMPANYING CONSOLIDATED FINANCIAL STATEMENTS.			

THE COMMUNITY FOUNDATION OF LOUISVILLE

Schedule D (Form 990) 2022	DEPOSITORY, INC.		31-1140889	Page 5
Schedule D (Form 990) 2022 Part XIII Supplemental Info	rmation (continued)			<u> </u>
- are yam cappionicina	(continued)			
				

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.
THE COMMUNITY FOUNDATION OF LOUISVILLE

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

DEPOSITORY, II	NC.						31-1140889
Part I General Information on Grants a	nd Assistance						
Does the organization maintain records to criteria used to award the grants or assistance.	stance?				~		on X Yes No
2 Describe in Part IV the organization's pro							
Part II Grants and Other Assistance to I recipient that received more than \$					anization answered "\	es" on Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
21ST CENTURY PARKS ENDOWMENT INC. 471 W. MAIN ST. #202 LOUISVILLE, KY 40202	20-8834817	509(A)(1)	1,010,850.	0.			N32 PARKS AND PLAYGROUNDS
350.ORG PO BOX 843004 BOSTON, MA 02284-3004	26-1150699	509(A)(1)	10,000.	0.			C01 ALLIANCE/ADVOCACY ORGANIZATIONS
502CIRCLE NIL COLLECTIVE FOUNDATION - 212 N 2ND ST., STE 100 - RICHMOND, KY 40475	92-0905366	509(A)(2)	15,000.	0.			N01 ALLIANCE/ADVOCACY ORGANIZATIONS
A CHOICE FOR LIFE INC 701 W MUHAMMAD ALI BLVD. LOUISVILLE, KY 40203	61-1142823	509(A)(1)	9,975.	0.			X20 CHRISTIAN
A CURE FOR ROBERT INC 508 TIFFANY LN LOUISVILLE, KY 40207	85-1792143	509(A)(1)	15,500.	0.			E12 FUNDRAISING AND/OR FUND DISTRIBUTION
ACADEMY FOR INDIVIDUAL EXCELLENCE 3101 BLUEBIRD LANE LOUISVILLE, KY 40299	81-4505964		195,000.	0.			B82 SCHOLARSHIPS STUDENT FINANCIAL AID AWARDS
2 Enter total number of section 501(c)(3) at			e line 1 table				365.

Schedule I (Form 990) DEPOSITORY, II	NC.						31-1140889 Page 1
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	urt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ACADEMY OF MUSIC PRODUCTION							
EDUCATION AND DEVELOPMENT INC							
1219 W. JEFFERSON ST., SUITE 206 -							
LOUISVILLE, KY 40203	47-1113120	509(A)(1)	23,000.	0.			A68 MUSIC
ACADEMY OF OUR LADY OF MERCY DBA MERCY ACADEMY, 5801 FEGENBUSH 1 LOUISVILLE, KY 40228	61-1116388	509(A)(1)	15,150.	0.			B EDUCATIONAL INSTITUTIONS
ACLU FOUNDATION, INC. 125 BROAD STREET 18TH FLOOR NEW YORK, NY 10004-2400	13-6213516	509(A)(1)	5,750.	0.			R60 CIVIL LIBERTIES ADVOCACY
ACLU OF KENTUCKY FOUNDATION							L
325 W MAIN ST SUITE 2210	64 6050560	500/51/01	0				R60 CIVIL LIBERTIES
LOUISVILLE, KY 40202	61-6058569	509(A)(2)	27,300.	0.			ADVOCACY
ADELANTE HISPANIC ACHIEVERS INC. 4801 SOUTHSIDE DR							O50 YOUTH DEVELOPMENT
LOUISVILLE, KY 40214	20-2267012	509(A)(1)	11,000.	0.			PROGRAMS
AFRICAN WILDLIFE FOUNDATION 1100 NEW JERSEY AVE SE, SUITE 900 WASHINGTON, DC 20003	52-0781390	509(A)(1)	10,000.	0.			D30 WILDLIFE PRESERVATION/PROTECTION
ALL GOD'S CHILDREN INTERNATIONAL 1400 NE 136TH AVE SUTE 201							
VANCOUVER, WA 98684	93-1052909	509(A)(2)	33,000.	0.			P31 ADOPTION
ALL PEOPLES A UNITARIAN							
UNIVERSALIST CONGREGATION - 4936							
BROWNSBORO ROAD - LOUISVILLE, KY		L		_			X RELIGION SPIRITUAL
40222	61-0593460	RELIGIOUS ORGANI	14,787.	0.			DEVELOPMENT
ALL SAINTS CATHOLIC CHURCH PO BOX 531							
TAYLORSVILLE, KY 40071	61-0447247	509(A)(1)	6,200.	0.			X22 ROMAN CATHOLIC
,,		//	1,200.	••		1	

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALZHEIMER'S DISEASE RESEARCH							
FOUNDATION - DBA CURE ALZHEIMER'S							
FUND, 34 WASHINGTON ST. SUITE 310 - WELLESLEY HILLS, MA 02481	52-2396428	509/31/11	16,827.	0.			H83 ALZHEIMER'S
WEDDESDET HIDDS, MA 02401	32 2330420	505(R)(1)	10,027.	٠.			IN ADDITION OF
AMERICAN NATIONAL RED CROSS							
431 18TH ST NW							M20 DISASTER PREPAREDNESS
WASHINGTON, DC 20006	53-0196605	509(A)(1)	13,500.	0.			AND RELIEF SERVICE
AMERICAN RED CROSS - EASTERN							
KENTUCKY CHAPTER - 101 BULLDOG							M20 DISASTER PREPAREDNESS
LANE, SUITE 300 - HAZARD, KY 41701	53-0196605	509(A)(1)	11,750.	0.			AND RELIEF SERVICE
AMERICAN RED CROSS - LOUISVILLE							
AREA CHAPTER - 510 EAST CHESTNUT							M20 DISASTER PREPAREDNESS
STREET - LOUISVILLE, KY 40202	53-0196605	509(A)(1)	75,000.	0.			AND RELIEF SERVICE
SIREET BOOTSVILLE, KI 40202	33 0130003	505(R)(1)	75,000.	٠.			AND REDIEF SERVICE
AMERICANA COMMUNITY CENTER							
4801 SOUTHSIDE DR.							P84 ETHNIC/IMMIGRANT
LOUISVILLE, KY 40214	61-1251306	509(A)(1)	12,750.	0.			SERVICES
ANCHAL INC.							
PO BOX 7392							P20 HUMAN SERVICE
LOUISVILLE, KY 40257	27-2959378	509(A)(1)	20,800.	0.			ORGANIZATIONS
and the state of t							
APOSTOLIC CHURCH INTERNATIONAL USA							
INC - 2042 SUNSET LAKE RD -	13-3771775	E00/3\/1\	49,000.	0.			X20 CHRISTIAN
NEWARK, DE 19702	13-37/17/5	509(A)(1)	49,000.	0.			AZU CHRISIIAN
APPALACHIAN ARTS ALLIANCE INC							
612 MAIN ST							A01 ALLIANCE/ADVOCACY
HAZARD, KY 41701	46-1391829	509(A)(2)	10,000.	0.			ORGANIZATIONS
-			·				
APPALACHIAN CITIZENS LAW CENTER							
317 MAIN STREET							
WHITESBURG, KY 41858	61-1401589	509(A)(1)	8,250.	0.			180 LEGAL SERVICES

31-1140889

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government valuation non-cash assistance or assistance if applicable cash grant noncash (book, FMV, assistance appraisal, other) A99 OTHER ART CULTURE APPALSHOP INC. HUMANITIES PO BOX 1325 ORGANIZATIONS/SERVICES WHITESBURG, KY 41858 61-0890210 509(A)(1) 20,750 0. N.E.C.* ARCHDIOCESE OF LOUISVILLE CATHOLIC SERVICES APPEAL, PO BOX 32 LOUISVILLE, KY 40232 61-0447247 509(A)(1) 72,750 0 X22 ROMAN CATHOLIC AREA MINISTRIES FOR EMERGENCY NEEDS - PO BOX 571 - LA GRANGE TX P60 EMERGENCY ASSISTANCE 78945 74-2626889 509(A)(1) 10,000 0. (FOOD CLOTHING CASH) ASSOCIATION OF COMMUNITY MINISTRIES INC - PO BOX 99545 -X12 FUNDRAISING AND/OR LOUISVILLE, KY 40269 61-1361750 509(A)(1) 10,000. 0 FUND DISTRIBUTION ASSOCIATION OF FORMER STUDENTS OF TEXAS A&M UNIVERSITY - 505 GEORGE BUSH DRIVE - COLLEGE STATION, TX 74-0490865 509(A)(1) 77840 0. 20,000 B84 ALUMNI ASSOCIATIONS ASSUMPTION HIGH SCHOOL 2170 TYLER LANE LOUISVILLE, KY 40205 61-1133759 509(A)(1) 0. B25 SECONDARY/HIGH SCHOOL 25,000 BAPTIST FELLOWSHIP CENTER 1351 CATALPA ST P20 HUMAN SERVICE 56-2603476 509(A)(1) **ORGANIZATIONS** LOUISVILLE, KY 40211 6 000 0. BAPTIST HEALTH FOUNDATION GREATER LOUISVILLE - 4007 KRESGE WAY, , E11 SINGLE ORGANIZATION SUPPORT LOUISVILLE, KY 40207 20-0292291 509(A)(3) TYPE I 12,300. 0. BAPTIST HOSPITALS FOUNDATION INC 4007 KRESGE WAY E11 SINGLE ORGANIZATION 31-1122867 509(A)(1) SUPPORT LOUISVILLE, KY 40207 20 000 0.

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) BARDSTOWN UNITED METHODIST CHURCH 116 E. FLAGET X RELIGION SPIRITUAL DEVELOPMENT BARDSTOWN, KY 40004 61-0646117 RELIGIOUS ORGANI 12,050 0. BASTROP COUNTY WOMEN'S SHELTER DBA FAMILY CRISIS CENTER, PO BOX 78 P43 FAMILY VIOLENCE BASTROP, TX 78602 74-2304542 509(A)(1) 8,000 0 SHELTERS AND SERVICES BEACON HOUSE AFTERCARE PROGRAM 963 SOUTH 2ND STREET F22 ALCOHOL DRUG ABUSE LOUISVILLE, KY 40203 31-1497608 509(A)(2) 17,000 0. (TREATMENT ONLY) BEARGRASS CHRISTIAN CHURCH 4100 SHELBYVILLE ROAD X RELIGION SPIRITUAL LOUISVILLE, KY 40207 61-1219287 509(A)(1) 8,000, 0 DEVELOPMENT BELLARMINE UNIVERSITY 2001 NEWBURG ROAD B43 UNIVERSITY OR 61-0482955 509(A)(1) TECHNOLOGICAL LOUISVILLE, KY 40205-0671 0. 163,076, BELLEVUE BAPTIST CHURCH 4950 KY-56 OWENSBORO, KY 42301 61-0598848 RELIGIOUS ORGANI 0. X20 CHRISTIAN 57,000 BEREA COLLEGE CPO 2216 B40 HIGHER ED 61-0444650 509(A)(1) INSTITUTIONS BEREA KY 40404 12 550 0. BETHLEHEM HIGH SCHOOL 309 WEST STEPHEN FOSTER AVE. B EDUCATIONAL BARDSTOWN, KY 40004 61-0592028 509(A)(1) 85,400. 0. INSTITUTIONS BLINN COLLEGE FOUNDATION INC 902 COLLEGE AVE B11 SINGLE ORGANIZATION 74-2581806 509(A)(1) SUPPORT BRENHAM, TX 77833 8 000. 0.

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant valuation non-cash assistance or assistance organization or government if applicable cash grant noncash (book, FMV, assistance appraisal, other) BOY SCOUTS OF AMERICA - LINCOLN HERITAGE COUNCIL - 12001 SYCAMORE STATION PLACE - LOUISVILLE, KY 40299 61-0445839 509(A)(1) 15,000 0. b40 scouting BOYS & GIRLS CLUBS INC. AKA BOYS & GIRLS CLUBS OF KENTUCKIANA, 3900 CRITTENDEN DRIVE 023 BOYS AND GIRLS CLUBS - LOUISVILLE, K 61-0568789 509(A)(1) 8,700 0 (COMBINED) BOYS & GIRLS CLUBS OF CHAMPION 023 BOYS AND GIRLS CLUBS VALLEY - PO BOX 897 - WEIMAR TX 78962 06-1674854 509(A)(1) 7,000 0. (COMBINED) BROADWAY BAPTIST CHURCH 4000 BROWNSBORO ROAD LOUISVILLE, KY 40207 61-6001947 RELIGIOUS ORGANI 0 X20 CHRISTIAN 15,550. BUMI SEHAT FOUNDATION INTERNATIONAL - 25 COLBY ST -E20 HOSPITALS AND PRIMARY 47-0944511 509(A)(1) 0. MEDICAL CARE FACILITIES BARRE, VT 05641 10,000 BUTLER UNIVERSITY 4600 SUNSET AVE. B EDUCATIONAL INDIANAPOLIS, IN 46208 35-0867977 509(A)(1) 0. INSTITUTIONS 54,470, CABBAGE PATCH SETTLEMENT HOUSE INC. - 1413 SOUTH SIXTH STREET -P28 NEIGHBORHOOD CENTER SETTLEMENT HOUSE LOUISVILLE KY 40208 61-0458359 509(A)(1) 38 450 0. CANEY CREEK COMMUNITY CENTER DBA ALICE LLOYD COLLEGE, 100 PURPOSE ROAD - PIPPA PASSES, KY B EDUCATIONAL 41844-9988 61-0492351 509(A)(2) 5,650, 0. INSTITUTIONS CARE GIFT CENTER, PO BOX 1870 MERRIFIELD, VA 22116-8070 13-1685039 509(A)(1) 10 200 0. 033 INTERNATIONAL RELIEF

Schedule I (Form 990)

Page 1

DEPOSITORY, INC. Schedule I (Form 990)

(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
CARE AND SHARE INC							
AKA CARE & SHARE FOOD BANK FOR							K31 FOOD BANKS FOOD
SOUTHERN COLORADO, 2605 PREAMBLE PT - COLORAD	84-0731930	509/2\/1\	10,000.	0.			PANTRIES
TT COLONID	04 0731330	303(11)(1)	10,000.	0.			IMIKIBS
CAREMESSAGE							
PO BOX 7307							B EDUCATIONAL
SAN FRANCISCO, CA 94120	27-3252911	509(A)(1)	25,000.	0.			INSTITUTIONS
CASA DEL HERRERO							
1387 E VALLEY RD	EE 0240201	F00/3\/0\	6.050	0			A ARTS CULTURE AND
SANTA BARBARA, CA 93108	77-0340301	509(A)(Z)	6,850.	0.			HUMANITIES
CASA, INC.							
982 EASTERN PKWY #9							I72 CHILD ABUSE
LOUISVILLE, KY 40217-1566	61-1066568	509(A)(1)	9,200.	0.			PREVENTION OF
CATHOLIC CHARITIES OF LOUISVILLE							P99 HUMAN
INC 2911 S. FOURTH STREET -							SERVICES-MULTIPURPOSE &
LOUISVILLE, KY 40208	61-1239600	509(A)(1)	18,800.	0.			OTHER N.E.C.*
CATHOLIC EDUCATION FOUNDATION							
401 W. MAIN ST. #806							B82 SCHOLARSHIPS STUDENT
LOUISVILLE, KY 40202	61-1294640	509(A)(1)	214,150.	0.			FINANCIAL AID AWARDS
·			,				
CATHOLIC RELIEF SERVICES							
PO BOX 5200							M20 DISASTER PREPAREDNES
HARLAN, IA 51593	13-5563422	509(A)(1)	9,200.	0.			AND RELIEF SERVICE
CATHOLICS FOR CHILDREN INC.							
AKA BILLBOARDS FOR LIFE, PO BOX 620							
PEWEE VALLEY, KY 40056	35-2000817	509(A)(1)	5,001.	0.			R62 RIGHT TO LIFE
	20 200017	/\-/	3,001.	0.			
CAVE HILL HERITAGE FOUNDATION INC							
701 BAXTER AVE.							Y50 CEMETERIES AND BURIA
LOUISVILLE, KY 40204	56-2498254	509(A)(1)	8,500.	0.			SERVICES

DEPOSITORY, INC. Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) F33 GROUP HOME CEDAR LAKE LODGE RESIDENTIAL TREATMENT 9505 WILLIAMSBURG PLAZA STE 200 FACILITY-MENTAL HEALTH LOUISVILLE, KY 40222 61-0713587 509(A)(2) 5,800 0. RELATED CENTER FOR FURNITURE CRAFTSMANSHIP 25 MILL STREET. ROCKPORT, ME 04856 01-0517984 509(A)(2) 15,000 0 B99 EDUCATION N.E.C.* CENTER FOR WOMEN AND FAMILIES P.O. BOX 2048 P43 FAMILY VIOLENCE LOUISVILLE, KY 40201-2048 61-0444846 509(A)(1) 20,650 0. SHELTERS AND SERVICES CENTRAL PRESBYTERIAN CHURCH 318 WEST KENTUCKY STREET LOUISVILLE, KY 40203 61-0459493 509(A)(1) 21,329, 0 X21 PROTESTANT CENTRAL TEXAS FOOD BANK 6500 METROPOLIS DRIVE k31 FOOD BANKS FOOD 74-2217350 509(A)(1) 0. PANTRIES AUSTIN, TX 78744 7,000 CENTRE COLLEGE OF KENTUCKY 600 W. WALNUT ST B42 UNDERGRADUATE COLLEGE DANVILLE KY 40422 61-0444671 509(A)(1) 0. (4-YEAR) 6.750 CHAPEL HILL UNITED CHURCH OF CHRIST - 2307 EMBASSY LANE -X RELIGION SPIRITUAL LOUISVILLE KY 40216 61-0602255 RELIGIOUS ORGANI DEVELOPMENT 14 400 0. CHARLESTON LIBRARY SOCIETY 164 KING ST. B EDUCATIONAL CHARLESTON, SC 29401 57-0314372 509(A)(1) 13,000. 0. INSTITUTIONS CHEYENNE MOUNTAIN ZOOLOGICAL SOCIETY - AKA CHEYENNE MOUNTAIN ZOO, 4250 CHEYENNE MOUNTAIN ZOO D50 ZOO ZOOLOGICAL SOCIETY ROAD - COLORADO SPRINGS, CO 80906 84-0407039 509(A)(2) 17 500 0.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDREN'S HOSPITAL FOUNDATION - LOUISVILLE - DEPT. 86140, P.O. BOX 950183 - LOUISVILLE, KY 40295-0183	61-6027530	509(A)(1)	6,700.	0.			E11 SINGLE ORGANIZATION
CHRIST CHURCH UNITED METHODIST 4614 BROWNSBORO ROAD LOUISVILLE, KY 40207		RELIGIOUS ORGANI	137,298.	0.			X RELIGION SPIRITUAL DEVELOPMENT
CHRISTIAN EDUCATIONAL CONSORTIUM 331 S BIRCHWOOD AVE LOUISVILLE, KY 40206	16-1677156	509(A)(1)	6,000.	0.			B20 ELEMENTARY SECONDARY
CHRISTOPHER 2X GAME CHANGERS 1800 W. MUHAMMAD ALI BLVD, STE. 2D: LOUISVILLE, KY 40203-1560	2 83-0655030	509(A)(1)	16,000.	0.			P62 VICTIMS' SERVICES
CHURCH HOME & INFIRMARY EPISCOPAL CHURCH HOME - 7504 WESTPORT ROAD - LOUISVILLE, KY 40222	61-0461720	509(A)(2)	16,100.	0.			E91 NURSING CONVALESCENT
CHURCH OF THE ETERNAL HILLS PO BOX 300 TABERNASH, CO 80478	51-0211480	509(A)(1)	30,000.	0.			X20 CHRISTIAN
CHURCH OF THE HOLY SPIRIT 3345 LEXINGTON ROAD LOUISVILLE, KY 40206	61-0700575	509(A)(1)	12,100.	0.			X RELIGION SPIRITUAL DEVELOPMENT
CHURCH WORLD SERVICE 28606 PHILLIPS ST, PO BOX 968 ELKHART, IN 46514	13-4080201	509(A)(1)	17,000.	0.			Q33 INTERNATIONAL RELIEF
CITY OF CENTRAL CITY 214 N 1ST ST CENTRAL CITY, KY 42330	61-6001800	170(C)(1)	22,000.	0.			W PUBLIC SOCIETY BENEFIT

(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
COALITION FOR THE HOMELESS							
1300 S 4TH ST. #250							L01 ALLIANCE/ADVOCACY
LOUISVILLE, KY 40208	61-1118307	509(A)(2)	45,375.	0.			ORGANIZATIONS
COLORADO SPRINGS UTILITIES							
FOUNDATION - PO BOX 1103, MC 940 -							X11 SINGLE ORGANIZATION
COLORADO SPRINGS, CO 80903	20-8643063	509(A)(3) TYPE I	6,000.	0.			SUPPORT
COMBINED COMMUNITY ACTION							
165 WEST AUSTIN							P20 HUMAN SERVICE
GIDDINGS, TX 78942	74-1548511	509(A)(1)	12,000.	0.			ORGANIZATIONS
COMMONWEALTH FUND FOR KET, INC.							DOO EDWARD ONLY GEDWARD
600 COOPER DR	61-1285473	500/3\/1\	11,850.	0.			B90 EDUCATIONAL SERVICES AND SCHOOLS-OTHER
LEXINGTON, KY 40502	01-1205475	509(A)(1)	11,050.	0.			AND SCHOOLS-OTHER
COMMONWEALTH THEATRE CENTER							
1123 PAYNE STREET							
LOUISVILLE, KY 40204	61-0902722	509(A)(1)	6,500.	0.			A26 ARTS COUNCIL/AGENCY
COMMUNITY CATHOLIC CENTER INC.							
PO BOX 11065							B82 SCHOLARSHIPS STUDENT
LOUISVILLE, KY 40251	01-0785892	509(A)(1)	15,500.	0.			FINANCIAL AID AWARDS
COMMUNITY FOUNDATION OF LOUISVILLE			, -				
CORPORATE DEPOSITORY - 325 W. MAIN							
STREET, SUITE 1110 - LOUISVILLE,							
KY 40202	61-1100993	509(A)(1)	20,450.	0.			T31 COMMUNITY FOUNDATIONS
COMMUNITY FOUNDATION OF							
LOUISVILLE, INC 325 W. MAIN							T PHILANTHROPY
STREET, SUITE 1110 - LOUISVILLE,							VOLUNTARISM AND
KY 40202	31-0997017	509(A)(1)	2,889,000.	0.			GRANTMAKING
CONGREGATION ADATH JESHURUN							
2401 WOODBOURNE AVE.							X RELIGION SPIRITUAL
LOUISVILLE, KY 40205	61-0458363	509(A)(1)	11,452.	0.			DEVELOPMENT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CREASEY MAHAN NATURE PRESERVE INC							
12501 HARMONY LANDING ROAD							C ENVIRONMENTAL QUALITY
GOSHEN, KY 40026	31-0908496	509(A)(1)	6,800.	0.			PROTECTION BEAUTIFICATION
CRESTWOOD UNITED METHODIST CHURCH							
7214 KAVANAUGH RD							X RELIGION SPIRITUAL
CRESTWOOD, KY 40014	61-0525162	RELIGIOUS ORGANI	30,200.	0.			DEVELOPMENT
CRITICALLY LOVED INC.							
PO BOX 43047							P30 CHILDREN'S AND YOUTH
LOUISVILLE, KY 40253	81-5273913	509(A)(1)	5,700.	0.			SERVICES
CROSS CATHOLIC OUTREACH			, , , , , ,				
2700 N. MILITARY TRAIL SUITE 240,							
PO BOX 273908 - BOCA RATON, FL							P12 FUNDRAISING AND/OR
33427-3908	65-1156061	509(A)(1)	10,500.	0.			FUND DISTRIBUTION
CROSSLAND COMMUNITY CHURCH INC							
600 31-W BYPASS SUITE 18D							
BOWLING GREEN, KY 42103	20-0157252	509(A)(1)	26,148.	0.			X20 CHRISTIAN
DARE TO CARE, INC.							
PO BOX 35458							K31 FOOD BANKS FOOD
LOUISVILLE, KY 40232	23-7345952	509(A)(1)	92,600.	0.			PANTRIES
DARTMOUTH COLLEGE			,				
GIFT RECORDING OFFICE, 6066							
DEVELOPMENT OFFICE - HANOVER, NH							B42 UNDERGRADUATE COLLEGE
03755	02-0222111	509(A)(1)	11,000.	0.			(4-YEAR)
DAVIDSON COLLEGE							
PO BOX 7170							B42 UNDERGRADUATE COLLEGE
DAVIDSON, NC 28035-7170	56-0529961	509(A)(1)	5,052.	0.			(4-YEAR)
DOCTORS WITHOUT BORDERS USA INC.							
PO BOX 5030							M20 DISASTER PREPAREDNESS
HAGERSTOWN, MD 21741	13-3433452	509(A)(1)	47,250.	0.			AND RELIEF SERVICE

Schedule I (Form 990) DEPOSITORY, II	NC.						31-1140889 Page 1
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DOUGLASS BOULEVARD CHRISTIAN CHURCH - 2005 DOUGLASS BOULEVARD - LOUISVILLE, KY 40205	61-0449616	509(A)(1)	19,350.	0.			X RELIGION SPIRITUAL DEVELOPMENT
DYNAMIC CATHOLIC INSTITUTE 5081 OLYMPIC BLVD. ERLANGER, KY 41018	26-4549213	509(A)(1)	7,000.	0.			X22 ROMAN CATHOLIC
EARTHJUSTICE 50 CALIFORNIA ST. #500 SAN FRANCISCO, CA 94111	94-1730465	509(A)(2)	9,566.	0.			C99 ENVIRONMENTAL QUALITY PROTECTION AND BEAUTIFICATION N.E.C.*
EPISCOPAL CHURCH OF THE ADVENT 901 BAXTER AVE. LOUISVILLE, KY 40204	61-0459581	RELIGIOUS ORGANI	35,000.	0.			X RELIGION SPIRITUAL DEVELOPMENT
EPISCOPAL RELIEF & DEVELOPMENT PO BOX 7058 MERRIFIELD, VA 22116-7058	73-1635264	509(A)(1)	5,500.	0.			K20 CHRISTIAN
EQUAL JUSTICE INITIATIVE 122 COMMERCE STREET MONTGOMERY, AL 36104	63-1135091	509(A)(1)	20,200.	0.			183 PUBLIC INTEREST LAW/LITIGATION
EVOLVE502, INC. 515 WEST MARKET STREET LOUISVILLE, KY 40202	83-1877240	509(A)(1)	270,000.	0.			B99 EDUCATION N.E.C.*
FAIRNESS EDUCATION FUND 2263 FRANKFORT AVENUE LOUISVILLE, KY 40206	61-1230383	509(A)(1)	6,400.	0.			B90 EDUCATIONAL SERVICES AND SCHOOLS-OTHER
FAMILY & CHILDREN'S PLACE PO BOX 3784 LOUISVILLE, KY 40201	61-0549561	509(A)(1)	9,550.	0.			P40 FAMILY SERVICES

Part II Continuation of Grants and Other	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	
FAMILY COMMUNITY CLINIC INC. 1420 E WASHINGTON ST LOUISVILLE, KY 40206	27-2994215	509(A)(1)	60,500.	0.			E HEALTH-GENERAL & REHABILITATIVE	
FAMILY RENEWAL PROJECT 622 WOODLAKE DRIVE LOUISVILLE, KY 40245	81-4191808	509(A)(1)	6,250.	0.			P HUMAN SERVICES	
FAMILY SCHOLAR HOUSE, INC. 403 REG SMITH CIRCLE LOUISVILLE, KY 40208-2746	61-1285124	509(A)(1)	21,350.	0.			P42 SINGLE PARENT AGENCIES/SERVICES	
FATHER MALONEY'S BOYS' HAVEN INC. AKA BOYS AND GIRLS HAVEN, 2301 GOLDSMITH LANE - LOUISVILLE, KY 40218	61-0479621	509(A)(1)	12,800.	0.			P70 RESIDENTIAL CUSTODIAL CARE (GROUP HOME)	
FAYETTE COUNTY AREA FOUNDATION PO BOX 664 LA GRANGE, TX 78945	74-2997477	509(A)(2)	76,000.	0.			T PHILANTHROPY VOLUNTARISM AND GRANTMAKING	
FAYETTE COUNTY COMMUNITY THEATRE 3106 BRIDGE VALLEY RD LA GRANGE, TX 78945	81-4291834	509(A)(2)	6,000.	0.			A65 THEATER	
FAYETTE COUNTY HABITAT FOR HUMANITY - PO BOX 1127 - LA GRANGE, TX 78945	20-0729517	509(A)(1)	30,000.	0.			L20 HOUSING DEVELOPMENT CONSTRUCTION MANAGEMENT	
FILSON HISTORICAL SOCIETY AKA FILSON CLUB, 1310 SOUTH THIRD S LOUISVILLE, KY 40208	5 61-0444690	509(A)(1)	50,127.	0.			A80 HISTORICAL SOCIETIES AND RELATED ACTIVITIES	
FIRST FREE WILL BAPTIST CHURCH 4314 W 5TH STREET RD OWENSBORO, KY 42301	61-0910514	509(A)(1)	12,000.	0.			X21 PROTESTANT	

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	rage i
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIRST PRESBYTERIAN CHURCH -							
ELIZABETHTOWN - 1016 PEAR ORCHARD							X RELIGION SPIRITUAL
DR ELIZABETHTOWN, KY 42701	61-0183855	RELIGIOUS ORGANI	122,000.	0.			DEVELOPMENT
FIRST UNITED METHODIST CHURCH							
212 3RD STREET N.							X RELIGION SPIRITUAL
ST. PETERSBURG, FL 33701	59-0637842	509(A)(1)	17,500.	0.			DEVELOPMENT
Trouble Toby Governmen							220 111 MED DEGOVED OF
FLOYD'S FORK CONSERVANCY 1357 BARDSTOWN ROAD							C32 WATER RESOURCE WETLANDS CONSERVATION &
LOUISVILLE, KY 40204	47-1938011	509/31/11	25,000.	0.			MANAGEMENT
HOOTSVILLE, RI 40204	47-1938011	509(R)(I)	23,000.	0.			MANAGEMENT
FONS VITAE OF KENTUCKY INC.							X99 RELIGIOUS RELATED
49 MOCKINGBIRD VALLEY DRIVE							SPIRITUAL DEVELOPMENT
LOUISVILLE, KY 40207	61-1381228	509(A)(1)	7,250.	0.			N.E.C.*
FOOD FOR THE POOR INC.							
6401 LYONS ROAD	59-2174510	E00/3\/1\	11 500	0.			Q33 INTERNATIONAL RELIEF
COCONUT CREEK, FL 33073	39-21/4510	509(A)(I)	11,500.	0.			Q33 INTERNATIONAL RELIEF
FOUNDATION FIGHTING BLINDNESS							G41 EYE DISEASES
PO BOX 45740							BLINDNESS & VISION
BALTIMORE, MD 21297-5740	23-7135845	509(A)(1)	5,100.	0.			IMPAIRMENT
HOUNDAMION HOD ADDALLGUIAN							
FOUNDATION FOR APPALACHIAN KENTUCKY, INC 420 MAIN STREET -							
HAZARD, KY 41701	61-1329396	509(3)(1)	72,196.	0.			T31 COMMUNITY FOUNDATIONS
FRANCIS PARKER SCHOOL OF	01 1323330	505(117(17	72,130.	· ·			IST COMMONITY TOUNDATIONS
LOUISVILLE - DEVELOPMENT							
DEPARTMENT, 11000 U.S. HWY. 42 -							B EDUCATIONAL
GOSHEN, KY 40026	31-0896538	509(A)(1)	18,100.	0.			INSTITUTIONS
FRANCISCAN SHELTER HOUSE							P99 HUMAN
748 SOUTH PRESTON ST.	61_1001045	509/31/11	12 750	0.			SERVICES-MULTIPURPOSE & OTHER N.E.C.*
LOUISVILLE, KY 40203	61-1081045	D03(H)(I)	13,750.	<u> </u>			PIREK N.E.C.

DEPOSITORY, INC. Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (f) Method of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV. assistance appraisal, other) FRENCHMAN BAY CONSERVANCY C32 WATER RESOURCE PO BOX 150 WETLANDS CONSERVATION & HANCOCK, ME 04640 22-2849309 509(A)(1) 10,000 0. MANAGEMENT FRIENDS OF THE LIBRARY SMITHVILLE TEXAS - 507 MAIN STREET -B70 LIBRARIES LIBRARY SMITHVILLE, TX 78957 85-0337384 509(A)(1) 6,500 0 SCIENCE FUND FOR THE ARTS, INC. 623 WEST MAIN STREET A12 FUNDRAISING AND/OR LOUISVILLE, KY 40202 61-0479626 509(A)(1) 69,985 0. FUND DISTRIBUTION GARDENIA E. JANSSEN ANIMAL SHELTER 240 SVOBODA LANE 74-2726459 509(A)(1) LA GRANGE, TX 78945 40,000 0 D ANIMAL RELATED GATE OF HOPE MINISTRIES INTERNATIONAL INC - PO BOX 6481 -26-0281018 509(A)(1) LOUISVILLE, KY 40206 0. Q33 INTERNATIONAL RELIEF 12,100 GEORGETOWN COLLEGE DEVELOPMENT OFFFICE, 400 EAST COLLEGE STREET - GEORGETOWN, KY B42 UNDERGRADUATE COLLEGE 40324 61-0444695 509(A)(1) 0. (4-YEAR) 5,281 GILDA'S CLUB 2440 GRINSTEAD DRIVE LOUISVILLE, KY 40204 20-1635170 509(A)(1) G30 CANCER 43 705. 0. GIVEWELL AKA: GIVEWELL, 1714 FRANKLIN STREET OAKLAND, CA 94612 20-8625442 509(A)(1) 10,000. 0. T30 PUBLIC FOUNDATIONS GLYNWOOD CENTER INC PO BOX 157, 362 GLYNWOOD RD W70 LEADERSHIP DEVELOPMENT COLD SPRING, NY 10516 13-3852957 509(A)(1) 20 000 0.

Schedule I (Form 990) DEPOSITORY, IN	NC.						31-1140889 Page 1
Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	overnments (Scho	edule I (Form 990), Pa	ırt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GOODWILL INDUSTRIES OF KENTUCKY							
1325 SOUTH FOURTH STREET							
LOUISVILLE, KY 40208	61-0475284	509(A)(1)	7,300.	0.			J32 GOODWILL INDUSTRIES
,			1				
GREEN FORESTS WORK							
THOMAS POE COOPER BUILDING, 730 RO	5						
LEXINGTON, KY 40546	46-1296612	509(A)(1)	10,000.	0.			C36 FOREST CONSERVATION
GREEN HILL THERAPY INC.							
1410 LONG RUN ROAD	61 1250500	500/33/43	F 100	_			E50 REHABILITATIVE
LOUISVILLE, KY 40245	61-1378588	509(A)(1)	5,108.	0.			MEDICAL SERVICES
HABITAT FOR HUMANITY OF METRO							
LOUISVILLE, INC 1620 BANK							
STREET - LOUISVILLE, KY 40203	58-1735528	509(A)(1)	34,807.	0.			X20 CHRISTIAN
·			,				
HAND IN HAND MINISTRIES							P99 HUMAN
518 N. 26TH STREET							SERVICES-MULTIPURPOSE &
LOUISVILLE, KY 40212	61-1352889	509(A)(1)	33,800.	0.			OTHER N.E.C.*
HARBOR HOUSE OF LOUISVILLE							Dan Himan German
PO BOX 58219	61-1216323	E09/3\/2\	12,400.	0.			P20 HUMAN SERVICE ORGANIZATIONS
LOUISVILLE, KY 40268	01-1210323	505(A)(2)	12,400.	0.			F20 ALCOHOL DRUG AND
HEALING PLACE INC							SUBSTANCE ABUSE
1020 WEST MARKET ST.							DEPENDENCY PREVENTION &
LOUISVILLE, KY 40202	61-1164775	509(A)(1)	35,300.	0.			TREATMENT
HEARTLAND CHURCH INC.							
14900 EAST 126TH STREET							X RELIGION SPIRITUAL
FISHERS, IN 46037	35-2108005	509(A)(1)	16,000.	0.			DEVELOPMENT
WHI D OFFICE OF OWENCES							D00 111114231
HELP OFFICE OF OWENSBORO 1316 W. 4TH STREET							P99 HUMAN SERVICES-MULTIPURPOSE &
OWENSBORO, KY 42301	61-0724292	509(A)(1)	150,250.	0.			OTHER N.E.C.*
5.121.550NO, NI 4250I	01 0124232	/11/(1/	130,230.	<u> </u>		1	VIIII II.U.C.

DEPOSITORY, INC. Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) HIGHLAND PRESBYTERIAN CHURCH 1011 CHEROKEE ROAD X RELIGION SPIRITUAL LOUISVILLE, KY 40204 61-0538145 RELIGIOUS ORGANI 37,000 0. DEVELOPMENT HIGHVIEW BAPTIST CHURCH 7711 FEGENBUSH LANE X RELIGION SPIRITUAL LOUISVILLE, KY 40228 61-0601713 RELIGIOUS ORGANI 5,100 0 DEVELOPMENT HILDEGARD HOUSE PO BOX 5613 L99 OTHER HOUSING SHELTER LOUISVILLE, KY 40255 46-5555742 509(A)(1) 27,076 0. N.E.C.* HINDMAN SETTLEMENT SCHOOL 51 CENTER STREET, PO BOX 844 B24 PRIMARY/ELEMENTARY HINDMAN, KY 41822 61-0447248 509(A)(1) 0 SCHOOL 11,450, HIS CHURCH ANGLICAN 34500 SIX MILE RD. X RELIGION SPIRITUAL 20-4286188 509(A)(1) LIVONIA, MI 48152 0. DEVELOPMENT 76,000. HISTORIC LOCUST GROVE INC. 561 BLANKENBAKER LANE LOUISVILLE, KY 40207 61-1390403 509(A)(1) 0. A54 HISTORY MUSEUMS 9,050 HOLY CROSS HIGH SCHOOL 5144 DIXIE HIGHWAY 61-1053991 RELIGIOUS ORGANI LOUISVILLE KY 40216 40 000 0. B25 SECONDARY/HIGH SCHOOL HOLY SPIRIT CHURCH 3345 LEXINGTON RD. LOUISVILLE, KY 40206-3047 61-0447247 509(A)(1) 11,000. 0. X22 ROMAN CATHOLIC HOLY TRINITY CHURCH 501 CHERRYWOOD ROAD LOUISVILLE, KY 40207 61-0507073 RELIGIOUS ORGANI 83 050 0. X20 CHRISTIAN

Schedule I (Form 990) DEPOSITORY, IN							31-1140889 Page
Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	s and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOME OF THE INNOCENTS							
1100 E MARKET ST	64 0445004	500/53/43					P30 CHILDREN'S AND YOUTH
LOUISVILLE, KY 40206	61-0445834	509(A)(1)	70,804.	0.			SERVICES
HOSPARUS, INC. C/O DEVELOPMENT DEPARTMENT, 6200 DUTCHMANS LANE, STE 102 -							
LOUISVILLE, KY 40	61-0921718	509(A)(1)	31,054.	0.			P74 HOSPICE
HOSPICE BRAZOS VALLEY INC. 502 W. 26TH STREET							
BRYAN, TX 77803	74-2229794	509(A)(2)	8,000.	0.			P HUMAN SERVICES
HURSTBOURNE CHRISTIAN CHURCH 657 SOUTH HURSTBOURNE PARKWAY #349	61 0510500	500(3)(4)	6.005				X RELIGION SPIRITUAL
LOUISVILLE, KY 40222	61-0712799	509(A)(I)	6,075.	0.			DEVELOPMENT T99 OTHER PHILANTHROPY
IMPACT 100 LOUISVILLE 3044 BARDSTOWN ROAD #269 LOUISVILLE, KY 40205	84-3784887	509/71/11	14,100.	0.			VOLUNTARISM AND GRANTMAKING FOUNDATIONS N.E.C.*
LOUISVILLE, KI 40205	04-3704007	509(A)(1)	14,100.	0.			N.E.C.
INTERNATIONAL RESCUE COMMITTEE INC PO BOX 6068 - ALBERT LEA, MN 56007	13-5660870	509/21/11	9,620.	0.			O33 INTERNATIONAL RELIEF
ши 30007	13-3000870	509(K)(1)	3,020.	0.			Q33 INTERNATIONAL RELIEF
ISAAC W. BERNHEIM FOUNDATION INC. PO BOX 130, 2499 CLERMONT RD.	C1 0444CF1	500(2)(1)	00.050	•			GAC TODERE GONGERYAMION
CLERMONT, KY 40110	61-0444651	DU9(A)(I)	80,950.	0.			C36 FOREST CONSERVATION
JAMES DICK FOUNDATION FOR THE							
PERFORMING ARTS - PO BOX 89 -							A ARTS CULTURE AND
ROUND TOP, TX 78954	74-1732353	509(A)(1)	26,000.	0.			HUMANITIES
JEWISH COMMUNITY OF LOUISVILLE,							T70 FUNDRAISING
INC D/B/A JEWISH FEDERATION OF							ORGANIZATIONS THAT CROSS
LOUISVILLE, 3600 DUTCHMANS LANE -							CATEGORIES (INCLUDES
LOUISVILLE, KY 40205	61-0444765	509(A)(1)	32,699.	0.			COMMUNITY FUNDS)

(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 SOUTH PALM							
BEACH COUNTY - 9901 DONNA KLEIN							
BOULEVARD - BOCA RATON, FL							P12 FUNDRAISING AND/OR
33428-1788	59-1945109	509(A)(1)	12,000.	0.			FUND DISTRIBUTION
JOHNS HOPKINS UNIVERSITY SCHOOL OF							
ADVANCED INTERNATIONAL STUDIES -							
555 PENNSYLVANIA AVE NW - SUITE							B43 UNIVERSITY OR
#500 - WASHINGTON, DC 20001	52-0595110	509(A)(1)	15,000.	0.			TECHNOLOGICAL
JOSHUA COMMUNITY CONNECTORS INC							
P.O. BOX 3133							P30 CHILDREN'S AND YOUTI
LOUISVILLE, KY 40201	87-1604640	509(A)(2)	10,000.	0.			SERVICES
JUNIOR ACHIEVEMENT OF KENTUCKIANA							
							DOO ELEMENHADY GEGONDADA
1401 W. MUHAMMAD ALI BLVD.	61 0476604	E00/3\/1\	20 000	0			B20 ELEMENTARY SECONDARY
LOUISVILLE, KY 40203	61-0476694	509(A)(1)	38,800.	0.			ED
KENAN-FLAGLER BUSINESS SCHOOL							
FOUNDATION - ADVANCEMENT, UNC							
KENAN-FLAGLER BUSINESS SCHOOL, CB#	FC 00010F0	500/31/41	05 000	0			B11 SINGLE ORGANIZATION
3440 - CHAPEL HILL, NC 27599-3400 KENTUCKY ANNUAL CONFERENCE OF THE	56-0771850	509(A)(1)	25,000.	0.			SUPPORT
UNITED METHODIST CHURCH - 7400							
FLOYDSBURG ROAD, , - CRESTWOOD,	61 1210006	DEL 1910119 ODG1111	5 450	0			
KY 40014	61-1310926	RELIGIOUS ORGANI	5,450.	0.			X20 CHRISTIAN
KENTUCKY CIVIC ENGAGEMENT TABLE							
INC - 2508 PORTLAND AVE., STE. 14							
- LOUISVILLE, KY 40212	83-2413836	509/31/11	10,000.	0.			S21 COMMUNITY COALITIONS
- LOUISVILLE, RI 40212	03-2413030	509(A)(1)	10,000.	0.			521 COMMONTH COADITIONS
KENTUCKY COUNTRY DAY SCHOOL							
4100 SPRINGDALE ROAD							B20 ELEMENTARY SECONDARY
LOUISVILLE, KY 40241	61-0731998	509(A)(1)	7,000.	0.			ED
,		, (-,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
KENTUCKY EDUCATIONAL TELEVISION							
FOUNDATION, INC 600 COOPER							
DRIVE - LEXINGTON, KY 40502	61-0722558	509(A)(1)	16,642.	0.			A32 TELEVISION

DEPOSITORY, INC. Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (f) Method of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) KENTUCKY HORSE PARK FOUNDATION 4075 IRON WORKS PARKWAY BLDG D LEXINGTON, KY 40511 62-1257717 509(A)(1) 10,200 0. N69 EQUESTRIAN RIDING KENTUCKY HUMANE SOCIETY ATTN: LAURA ZARTMAN, 1000 LYNDON D20 ANIMAL PROTECTION AND LANE SUITE B - LOUISVILLE, KY WELFARE (INCLUDES HUMANE 40222 61-0463938 509(A)(2) 14,100 0 SOCIETIES AND SPCAS) KENTUCKY HUMANITIES COUNCIL INC. 206 E. MAXWELL ST. LEXINGTON, KY 40508 31-0981031 509(A)(1) 151,300 0. A26 ARTS COUNCIL/AGENCY KENTUCKY NATURAL LANDS TRUST INC. 433 CHESTNUT ST. 61-1276913 509(A)(1) BEREA, KY 40403 0 C36 FOREST CONSERVATION 6,750. KENTUCKY OPERA ASSOCIATION DEVELOPMENT DEPARTMENT, 708 MAGAZINE STREET - LOUISVILLE, KY 61-6013111 509(A)(1) 0. A6A OPERA 40203 12,950 KENTUCKY PERFORMING ARTS FOUNDATION, INC. - DBA KENTUCKY CENTER FOR THE PERFORMING ARTS A11 STNGLE ORGANIZATION 501 W. MAIN ST. - LOUISVILLE, KY 31-0999046 509(A)(1) 0. SUPPORT 8,200 KENTUCKY RACE TRACK CHAPLAINCY INC. - PO BOX 324 - SIMPSONVILLE. KY 40067 X20 CHRISTIAN 31-1571797 509(A)(1) 7 000 0. KENTUCKY REFUGEE MINISTRIES, INC. 969-B CHEROKEE ROAD P20 HUMAN SERVICE LOUISVILLE, KY 40204 61-1229842 509(A)(2) 17,500. 0. **ORGANIZATIONS** KENTUCKY SHAKESPEARE INC 616 MYRTLE STREET LOUISVILLE, KY 40208 61-6036654 509(A)(1) 7 100 0. A65 THEATER

Schedule I (Form 990) DEFOSITORI, I				· (0 - l-	ll I /F 000\ D-		31-1140009 Page 1
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	s and Domestic Go	vernments (Sch	edule I (Form 990), Pa T	ırt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KENTUCKY STATE TREASURER							
PUBLIC PROTECTION CABINET, 500							
MERO STREET, 218 NC - FRANKFORT,							
KY 40601	61-0600439	170(C)(1)	34,700.	0.			1 GOVERNMENT ENTITY
KENTUCKY WESLEYAN COLLEGE							
OFFICE OF ADVANCEMENT, 3000							
FREDERICA ST OWENSBORO, KY							B42 UNDERGRADUATE COLLEGE
42302	61-0466713	509(A)(1)	152,100.	0.			(4-YEAR)
WDWN 6011 D6D							
KEUKA COLLEGE							
141 CENTRAL AVE	16 6054005	E00/33/43	5 050	_			B EDUCATIONAL
KEUKA PARK, NY 14478	16-6054295	509(A)(1)	5,250.	0.			INSTITUTIONS
KIDS CANCER ALLIANCE INC.							E86 PATIENT
P.O. BOX 24337							SERVICES-ENTERTAINMENT
LOUISVILLE, KY 40224	61-1256743	509/31/11	11,250.	0.			RECREATION
10015VIIIIE, RI 40224	01 1230743	505(K)(1)	11,250.	<u> </u>			RECREATION
KIDS CENTER FOR PEDIATRIC							
THERAPIES - 982 EASTERN PARKWAY -							
LOUISVILLE, KY 40217	61-0492378	509(A)(1)	10,200.	0.			G98 PEDIATRICS
			1				
KMAC MUSEUM							
715 WEST MAIN STREET							A40 VISUAL ARTS
LOUISVILLE, KY 40202	61-0985312	509(A)(1)	5,500.	0.			ORGANIZATIONS
KOSAIR CHARITIES COMMITTEE, INC.							
PO 950136							E12 FUNDRAISING AND/OR
LOUISVILLE, KY 40295-0136	61-0514703	509(A)(1)	9,100.	0.			FUND DISTRIBUTION
LA CASITA CENTER							
PO BOX 1844							L
LOUISVILLE, KY 40201	74-3178408	509(A)(1)	13,850.	0.			P33 CHILD DAY CARE
LAKE WALES FIRST BAPTIST CHURCH							
338 E. CENTRAL AVENUE							
LAKE WALES, FL 33853	59-0818915	509(A)(1)	22,050.	0.			X21 PROTESTANT
	1 33 0010313	DO3/R/(1/		<u> </u>			MIZI INCIDUANI

31-1140889

Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEADERSHIP LOUISVILLE FOUNDATION							
711 WEST MAIN STREET, UNIT AA							W70 LEADERSHIP
LOUISVILLE, KY 40202	31-0958491	509(A)(1)	10,400.	0.			DEVELOPMENT
LEGAL AID SOCIETY INC.							
416 W. MUHAMMAD ALI BLVD. #300							183 PUBLIC INTEREST
LOUISVILLE, KY 40202	61-0537626	509(A)(1)	44,150.	0.			LAW/LITIGATION
LIFEHOUSE INC.							
2710 REIDLING RD							
LOUISVILLE, KY 40206	20-8514733	509(A)(1)	12,200.	0.			P31 ADOPTION
TANKEN PROMISE TWO							WAA DEL TATOMA DEL LEED
LIGHTHOUSE PROMISE INC.							X99 RELIGIOUS RELATED
5312 SHEPHERDSVILLE ROAD	61 1260760	E00/3\/4\	10.450	_			SPIRITUAL DEVELOPMENT
LOUISVILLE, KY 40228	61-1362760	509(A)(1)	10,450.	0.			N.E.C.*
LINCOLN FOUNDATION							
4322 BISHOP LANE							B90 EDUCATIONAL SERVICES
LOUISVILLE, KY 40218	61-0449631	509(A)(1)	9,106.	0.			AND SCHOOLS-OTHER
LITTLE SISTERS OF THE POOR							
HOME FOR THE AGED OF LOUISVILLE,							
15 AUDUBON PLAZA DRIVE -							
LOUISVILLE, KY 402	61-0487466	509(A)(1)	21,450.	0.			X22 ROMAN CATHOLIC
LITTLE WAY PREGNANCY RESOURCE							
CENTER INC 515 W. OAK ST							
LOUISVILLE, KY 40203	61-1055060	509(A)(1)	16,950.	0.			P40 FAMILY SERVICES
TATING MARRIED ROD WITH WORLD							
LIVING WATERS FOR THE WORLD							
5016 SPEDALE CT. #399	00 0041606	E00/3\/4\	25.000	_			22
SPRING HILL, TN 37174	82-2041626	DU3(Y)(T)	35,000.	0.			Q33 INTERNATIONAL RELIEF
LOAVES AND FISHES							
500 E CALDWELL STREET							
LOUISVILLE, KY 40203	45-3843975	509(A)(1)	6,600.	0.			x20 CHRISTIAN

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOUISVILLE ASSOCIATION FOR COMMUNITY ECONOMICS - PO BOX 1501, , - LOUISVILLE, KY 40201	82-1927610	509(A)(1)	5,200.	0.			s01 ALLIANCE/ADVOCACY ORGANIZATIONS
LOUISVILLE BALLET 315 EAST MAIN STREET LOUISVILLE, KY 40202	61-6033779	509(A)(1)	221,090.	0.			A63 BALLET
LOUISVILLE COLLEGIATE SCHOOL 2427 GLENMARY AVENUE LOUISVILLE, KY 40204	61-0449630	509(A)(1)	41,300.	0.			B20 ELEMENTARY SECONDARY
LOUISVILLE FREE PUBLIC LIBRARY FOUNDATION - 301 YORK STREET - LOUISVILLE, KY 40203	61-0969361	509(A)(1)	28,800.	0.			B70 LIBRARIES LIBRARY SCIENCE
LOUISVILLE METRO POLICE FOUNDATION 982 EASTERN PARKWAY BOX #5 LOUISVILLE, KY 40217	61-1498961	509(A)(1)	26,100.	0.			I01 ALLIANCE/ADVOCACY ORGANIZATIONS
LOUISVILLE OLMSTED PARKS CONSERVANCY, INC 1299 TREVILIAN WAY - LOUISVILLE, KY 40213	61-1196368	509(A)(1)	98,185.	0.			N32 PARKS AND PLAYGROUNI
LOUISVILLE ORCHESTRA INC. 624 W MAIN STREET STE 400 LOUISVILLE, KY 40202	61-6000384	509(A)(2)	406,114.	0.			A69 SYMPHONY ORCHESTRAS
LOUISVILLE PUBLIC MEDIA 619 SOUTH 4TH STREET LOUISVILLE, KY 40202	61-1259787	509(A)(1)	72,887.	0.			A34 RADIO
LOUISVILLE SOCCER FOUNDATION 801 EDITH RD LOUISVILLE, KY 40206	84-4488762	509(A)(1)	5,100.	0.			B99 EDUCATION N.E.C.*

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOUISVILLE STORY PROGRAM							
851 S. 4TH ST.							
LOUISVILLE, KY 40203	47-5237414	509(A)(1)	14,650.	0.			A33 PRINTING PUBLISHING
LOUISVILLE URBAN LEAGUE 1535 WEST BROADWAY							
LOUISVILLE, KY 40203	61-0444771	509(A)(1)	18,350.	0.			P22 URBAN LEAGUE
LOUISVILLE VISUAL ART 1538 LYTLE STREET LOUISVILLE, KY 40203	61-0492348	509(A)(1)	26,100.	0.			A40 VISUAL ARTS ORGANIZATIONS
MANHATTAN CHAMBER PLAYERS INC							
330 WAGNER ST.	47 4000206	E00/3\/1\	7 500	0			ACO DEDECRATING ADEC
NEW ORLEANS, LA 70114	47-4992386	509(A)(1)	7,500.	0.			A60 PERFORMING ARTS
MARYHURST INC.							
1015 DORSEY LANE							
LOUISVILLE, KY 40223	31-1542209	509(A)(1)	45,684.	0.			P31 ADOPTION
MARYKNOLL FATHERS & BROTHERS							
P.O. BOX 302							X RELIGION SPIRITUAL
MARYKNOLL, NY 10545-0304	13-1740144	509(A)(1)	10,000.	0.			DEVELOPMENT
MASONIC HOMES OF KENTUCKY INC.			, ,				
ATTN: MISSION ADVANCEMENT, 330							
MASONIC HOME DRIVE - MASONIC HOME,							P75 SENIOR CONTINUING
KY 40041	61-0458374	509(A)(1)	20,000.	0.			CARE COMMUNITIES
MAYO CLINIC	_						
DEPARTMENT OF DEVELOPMENT, 200 FIRE		500/53/03	15.000				E21 COMMUNITY HEALTH
ROCHESTER, MN 55905	41-6011702	509(A)(2)	15,200.	0.			SYSTEMS
MENTORKIDS KENTUCKY							
2815 VEACH ROAD							O31 BIG BROTHER BIG
OWENSBORO, KY 42303	61-1222299	509(A)(1)	7,500.	0.			SISTERS

Schedule I (Form 990) DEPOSITORY, IN				- /	/=		31-1140889 Page
Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa I	rt II.) T	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
METRO UNITED WAY, INC.							
334 E BROADWAY, PO BOX 4488							P30 CHILDREN'S AND YOUTH
LOUISVILLE, KY 40204-0488	61-0444680	509(A)(1)	166,042.	0.			SERVICES
MILTON BAPTIST CHURCH							
10076 HIGHWAY 421 N							
MILTON, KY 40045	61-1037421	RELIGIOUS ORGANI	10,500.	0.			X20 CHRISTIAN
MINI HORSE HELPERS							
PO BOX 642							D99 ANIMAL RELATED
LA GRANGE, TX 78945	46-3014368	509(A)(1)	6,000.	0.			ACTIVITIES N.E.C.*
MOUNTAIN STATE SPOTLIGHT INC							W99 PUBLIC SOCIETY
170 SUMMERS STREET, SUITE 210							BENEFIT-MULTIPURPOSE &
CHARLESTON, WV 25301	85-1154363	509(A)(1)	10,000.	0.			OTHER N.E.C.*
MINIAMAD ALT MIGEUM AND EDUCATION							
MUHAMMAD ALI MUSEUM AND EDUCATION CENTER INC 144 N SIXTH ST -							A23 CULTURAL/ETHNIC
LOUISVILLE, KY 40202	61-1323046	509(A)(1)	5,600.	0.			AWARENESS
,			,				
MUSIC MAKER RELIEF FOUNDATION INC.							
PO BOX 1358							
HILLSBOROUGH, NC 27278	13-3782018	509(A)(1)	103,500.	0.			A68 MUSIC
NATIONAL COMPASSION FUND							
1450 DUKE STREET							I01 ALLIANCE/ADVOCACY
ALEXANDRIA, VA 22314	30-0022798	509(A)(1)	21,046.	0.			ORGANIZATIONS
NATIONAL TRUST FOR HISTORIC							
PRESERVATION IN THE US - 600 14TH							100 WIGHORIGE 2022-
STREET NW, SUITE 500 - WASHINGTON,	E2 0210007	E00/3\/1\	11 200	^			A80 HISTORICAL SOCIETIES
DC 20005	53-0210807	503(A)(I)	11,200.	0.			AND RELATED ACTIVITIES
NATIVITY ACADEMY AT ST. BONIFACE							
529 E. LIBERTY STREET	F4 045055	500(5)(4)	00.4-0	_			B24 PRIMARY/ELEMENTARY
LOUISVILLE, KY 40202	51-0450314	DU9(A)(1)	20,450.	0.			всноог

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEIGHBORHOOD FELLOWSHIP CHURCH							
3102 EAST 10TH STREET							X RELIGION SPIRITUAL
INDIANAPOLIS, IN 46201	35-2035206	509(A)(1)	10,000.	0.			DEVELOPMENT
NO MORE RED DOTS INC							
2429 PORTLAND AVE.							199 CRIME LEGAL RELATED
LOUISVILLE, KY 40212	83-1524454	509(A)(1)	25,000.	0.			N.E.C.*
NORTHEAST CHRISTIAN CHURCH							
9900 BROWNSBORO RD.							
LOUISVILLE, KY 40241	61-0941327	509(A)(1)	19,000.	0.			X20 CHRISTIAN
NORTON HEALTHCARE FOUNDATION INC.							E11 GINGLE ODGANIZATION
DEPT 86140, PO BOX 950183 LOUISVILLE, KY 40295	31-0914919	E00/3\/1\	18,100.	0.			E11 SINGLE ORGANIZATION SUPPORT
10015VILLE, RI 40293	31-0314313	509(A)(1)	10,100.	<u> </u>			SOFFORT
NOTRE DAME PRIORY							
468 LOCUST GROVE RD							
SHELBYVILLE, KY 40065	81-4071739	509(A)(1)	5,200.	0.			X22 ROMAN CATHOLIC
NOULOU CHAMBER PLAYERS							
9915 FRINGE TREE COURT							
LOUISVILLE, KY 40241	81-3798238	509(A)(2)	10,000.	0.			A68 MUSIC
OLD DOMINION CONSERVATION &							
EDUCATIONAL FOUNDATION - BOX 222 -	02 4421100	500/31/01	5 250	_			C34 LAND RESOURCES
ORLEAN, VA 20128	83-4431129	509(A)(2)	5,350.	0.			CONSERVATION
OPEN DOORS OF ASHEVILLE							
290 HAYWOOD RD., SUITE 204							B90 EDUCATIONAL SERVICE
ASHEVILLE, NC 28806	27-1543937	509(A)(1)	10,000.	0.			AND SCHOOLS-OTHER
ORLANDO UNION RESCUE MISSION							
1521 W. WASHINGTON ST.							P85 HOMELESS
ORLANDO, FL 32805	59-1035082	509(A)(1)	10,000.	0.			SERVICES/CENTERS

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) OUR LADY OF LOURDES CHURCH 508 BRECKENRIDGE LANE X RELIGION SPIRITUAL DEVELOPMENT LOUISVILLE, KY 40207 61-6002467 RELIGIOUS ORGANI 96,000 0. OUR LADY OF LOURDES CHURCH X99 RELIGIOUS RELATED SPIRITUAL DEVELOPMENT 4029 FREDERICA ST OWENSBORO, KY 42301 61-0570011 509(A)(1) 6,000 0 N.E.C.* OUR LADY OF TEPEYAC HIGH SCHOOL 2228 SOUTH WHIPPLE ST. B EDUCATIONAL CHICAGO, IL 60623 36-2170826 509(A)(1) 6,000 0. INSTITUTIONS OWENSBORO CONSOLIDATED CATHOLIC SCHOOL SYSTEM - 1524 W. PARRISH B EDUCATIONAL AVE. - OWENSBORO, KY 42301 62-1357472 509(A)(1) 150,000, 0 ITNSTITUTIONS PARKVIEW BAPTIST CHURCH 403 HAYES RD 59-0971745 509(A)(1) FORT PIERCE, FL 34950 0. X20 CHRISTIAN 8,000 PAT TILLMAN FOUNDATION 180 N. LASALLE ST., STE. 2910 CHICAGO IL 60601 20-1072336 509(A)(1) 0. T30 PUBLIC FOUNDATIONS 20,000 PAWS WITH PURPOSE PO BOX 5458 P86 BLIND/VISUALLY 20-0681397 509(A)(1) IMPAIRED CENTERS SERVICES LOUISVILLE KY 40255 5 600 0. PEACE EDUCATION PROGRAM INC. P30 CHILDREN'S AND YOUTH AKA PEACE ED, 318 W. KENTUCKY STREE LOUISVILLE, KY 40203 61-1220204 509(A)(1) 22,000, 0. SERVICES PENDENNIS HISTORICAL FOUNDATION 218 W. MUHAMMAD ALI BLVD. A80 HISTORICAL SOCIETIES 20-0180924 509(A)(1) LOUISVILLE, KY 40202 5 550. 0. AND RELATED ACTIVITIES

(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
PLANNED PARENTHOOD OF INDIANA AND KENTUCKY - ATTN: DEVELOPMENT, PO	12 1644147	E00(7)(1)	21 240	0			E40 REPRODUCTIVE HEALTH
BOX 397 - INDIANAPOLIS, IN 46206	13-1644147	509(A)(I)	21,240.	0.			ALLIED SERVICES
PORTLAND CHRISTIAN SCHOOL SYSTEM INC 8509 WESTPORT RD LOUISVILLE, KY 40242	20-2918651	509(A)(1)	50,000.	0.			B20 ELEMENTARY SECONDARY ED
POST CLINIC INC 15 STERLING AVE MT. STERLING, KY 40353	31-1515325	509(A)(1)	8,000.	0.			E60 HEALTH SUPPORT SERVICES
PRECIOUS BLOOD CATHOLIC CHURCH 3306 FENMORE ST OWENSBORO, KY 42301	01-0949423	509(A)(1)	6,000.	0.			X99 RELIGIOUS RELATED SPIRITUAL DEVELOPMENT N.E.C.*
PRESBYTERIAN CHURCH OF DANVILLE 500 W. MAIN ST. DANVILLE, KY 40422	61-0587173	RELIGIOUS ORGANI	13,000.	0.			X RELIGION SPIRITUAL DEVELOPMENT
PRESBYTERIAN PUBLISHING CORPORATION - 100 WITHERSPOON ST LOUISVILLE, KY 40202	61-1251723	RELIGIOUS ORGANI	55,000.	0.			X21 PROTESTANT
PRESBYTERY OF TRANSYLVANIA PO BOX 23580 LEXINGTON, KY 40523	23-7008968	RELIGIOUS ORGANI	7,000.	0.			X21 PROTESTANT
PRESENTATION ACADEMY 861 S. 4TH ST. LOUISVILLE, KY 40203	61-0507080	509(A)(1)	118,450.	0.			B EDUCATIONAL INSTITUTIONS
PRESIDENT & FELLOWS OF MIDDLEBURY C/O GIFT ADMINISTRATION, MIDDLEBURY COLLEGE - MIDDLEBURY, VT 05753-6014	03-0179298	509(A)(1)	65,000.	0.			B43 UNIVERSITY OR TECHNOLOGICAL

DEPOSITORY, INC. Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) OUILT INSTITUTE INC. D/B/A TEXAS QUILT MUSEUM, 140 W. CO A50 MUSEUMS & MUSEUM LA GRANGE, TX 78945 90-0656954 509(A)(1) 5,300 0. ACTIVITIES RANDOLPH MACON ACADEMY 200 ACADEMY DR. B20 ELEMENTARY SECONDARY FRONT ROYAL, VA 22630 54-0505939 509(A)(1) 44,900 0 RECKONING INC. 2525 CLARENDON AVE LOUISVILLE, KY 40205-3033 84-2692296 509(A)(2) 20,200 0. A65 THEATER RED BIRD MISSION INC 70 OUEENDALE CENTER B20 ELEMENTARY SECONDARY BEVERLY, KY 40913 61-0674373 509(A)(1) 40,000. 0 REDEEMER'S GRACE CHURCH PO BOX 1161 X RELIGION SPIRITUAL 26-4430099 RELIGIOUS ORGANI JEFFERSONVILLE, IN 47131 0. DEVELOPMENT 11,300, RIP MEDICAL DEBT 28-07 JACKSON AVE, 5TH FL P50 PERSONAL SOCIAL LONG ISLAND CITY, NY 11101 47-1442997 509(A)(1) 0. SERVICES 25,200 RIVER FIELDS, INC. 1201 STORY AVENUE SUITE 215 C34 LAND RESOURCES 61-6032501 509(A)(1) CONSERVATION LOUISVILLE KY 40206 13 650 0. RONALD MCDONALD HOUSE CHARITIES OF KENTUCKIANA, INC. - 550 SOUTH FIRST STREET - LOUISVILLE, KY L99 OTHER HOUSING SHELTER 40202 31-1053467 509(A)(1) 20,001. 0. N.E.C.* ROSE COMMUNITY FOUNDATION 4500 CHERRY CREEK DRIVE SOUTH, STE DENVER, CO 80246 84-0920862 509(A)(1) 14 836 0. T31 COMMUNITY FOUNDATIONS

DEPOSITORY, INC. Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) ROTARY FUND OF LOUISVILLE INC. S80 COMMUNITY SERVICE 657 S HURSTBOURNE PKWY, SUITE D226 CLUBS (KIWANIS LIONS LOUISVILLE, KY 40222 61-6029858 509(A)(1) 7,200 0. JAYCEES ETC.) ROYAL AFRICAN FOUNDATION C30 NATURAL RESOURCE 473 12TH AVE CONSERVATION AND SALT LAKE CITY, UT 84103 82-0537124 509(A)(1) 16,200 0 PROTECTION SACRED HEART SCHOOLS INC. 3115 LEXINGTON RD B EDUCATIONAL LOUISVILLE, KY 40206 61-1181710 509(A)(1) 124,915. 0. INSTITUTIONS SAMARITAN'S PURSE PO BOX 3000 58-1437002 509(A)(1) 19,200. BOONE, NC 28607 0 X20 CHRISTIAN SAVE THE CHILDREN FEDERATION, INC. 501 KINGS HIGHWAY EAST SUITE 400 06-0726487 509(A)(1) FAIRFIELD, CT 06825 0. 35,000 Q33 INTERNATIONAL RELIEF SCOTT UNITED METHODIST CHURCH X99 RELIGIOUS RELATED PO BOX 135 SPIRITUAL DEVELOPMENT MAYSVILLE, KY 41056 61-1034817 RELIGIOUS ORGANI 0. N.E.C.* 10,300 SECOND PRESBYTERIAN CHURCH 3701 OLD BROWNSBORO ROAD 61-0466721 RELIGIOUS ORGANI LOUISVILLE KY 40207 71 320 0. X20 CHRISTIAN SECOND WIND THOROUGHBRED PROJECT. INC. - 65 POST ROAD - BETHUNE, SC D99 ANIMAL RELATED 29009 47-3445193 509(A)(2) 20,000. 0. ACTIVITIES N.E.C.* SHAKER VILLAGE OF PLEASANT HILL 3501 LEXINGTON ROAD HARRODSBURG, KY 40330-8846 61-0592561 509(A)(2) 35 650 0. A54 HISTORY MUSEUMS

DEPOSITORY, INC. 31-1140889

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	<u> </u>
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHARED EXPENSE HOUSING EDUCATION INITIATIVE INC - 5708 COACH GATE WYNDE - LOUISVILLE, KY 40207	82-3877278	509(A)(1)	15,000.	0.			L HOUSING SHELTER
SHELBY COUNTY PARKS AND RECREATION FOUNDATION - 717 BURKS BRANCH ROAD - SHELBYVILLE, KY 40065	38-3818270	509(A)(1)	10,000.	0.			N RECREATION SPORTS LEISURE ATHLETICS
SHOWING UP FOR RACIAL JUSTICE EDUCATION FUND, INC - PO BOX 1053 - BUFFALO, NY 14205	82-2309274	509(A)(1)	35,700.	0.			R99 CIVIL RIGHTS SOCIAL ACTION & ADVOCACY N.E.C.*
SIERRA CLUB FOUNDATION 2101 WEBSTER STREET SUITE 1250 OAKLAND, CA 94612	94-6069890	509(A)(1)	9,766.	0.			C99 ENVIRONMENTAL QUALITY PROTECTION AND BEAUTIFICATION N.E.C.*
SIMMONS COLLEGE OF KENTUCKY OFFICE OF DEVELOPMENT, 1000 S 4TH S LOUISVILLE, KY 40203	S 20-5289168	509(A)(1)	21,450.	0.			B43 UNIVERSITY OR TECHNOLOGICAL
SISTER VISITOR CENTER 2235 W MARKET ST LOUISVILLE, KY 40212	61-1239600	509(A)(1)	27,700.	0.			X RELIGION SPIRITUAL DEVELOPMENT
SISTERS OF CHARITY OF NAZARETH PO BOX 9 NAZARETH, KY 40048	61-0444781	509(A)(1)	32,300.	0.			X22 ROMAN CATHOLIC
SMITH COLLEGE SMITH COLLEGE GIFT ACCOUNTING, STODDARD ANNEX, 23 ELM STREET - NORTHAMPTON,	04-1843040	509(A)(1)	13,500.	0.			B43 UNIVERSITY OR TECHNOLOGICAL
SOS INTERNATIONAL INC. 1500 ARLINGTON AVE LOUISVILLE, KY 40206	27-2624272	509(A)(2)	62,900.	0.			Q INTERNATIONAL FOREIGN AFFAIRS AND NATIONAL SECURITY

31-1140889 DEPOSITORY, INC. Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) SOUTHEAST CHRISTIAN CHURCH 920 BLANKENBAKER PKWY LOUISVILLE, KY 40243 61-0850307 509(A)(1) 76,250 0. X20 CHRISTIAN SOUTHERN POVERTY LAW CENTER, INC. 400 WASHINGTON AVENUE R30 INTERGROUP/RACE MONTGOMERY, AL 36104 63-0598743 509(A)(1) 12,900 0 RELATIONS SOWING SEEDS WITH FAITH C/O DA'MARRION FLEMING, P.O. BOX 16 X RELIGION SPIRITUAL LOUISVILLE, KY 40256 81-4862518 509(A)(2) 11,000 0. DEVELOPMENT SPANISH RIVER PRESBYTERIAN CHURCH 2400 W YAMATO RD. BOCA RATON, FL 33431 59-1557427 509(A)(1) 8,000, 0 X21 PROTESTANT SPEED ART MUSEUM 2035 SOUTH THIRD STREET 61-0444823 509(A)(1) LOUISVILLE, KY 40208 0. 93,500, A51 ART MUSEUMS SPONSOR 4 SUCCESS INC 1219 WEST JEFFERSON STREET #205 P20 HUMAN SERVICE LOUISVILLE KY 40203 81-4780035 509(A)(1) 0. ORGANIZATIONS 150,000 ST JAMES ATLANTA UNITED METHODIST CHURCH - 4400 PEACHTREE DUNWOODY 58-0873408 RELIGIOUS ORGANI RD NE - ATLANTA GA 30342-3531 5 775. 0. X21 PROTESTANT ST JOHN THE BAPTIST EPISCOPAL CHURCH - PO BOX 2166 -BRECKENRIDGE, CO 80424-2166 84-1183673 RELIGIOUS ORGANI 12,000. 0. X20 CHRISTIAN ST. AGNES CHURCH 1920 NEWBURG ROAD X RELIGION SPIRITUAL LOUISVILLE, KY 40205-1400 61-0447247 509(A)(1) 0. DEVELOPMENT 19 400.

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant valuation non-cash assistance or assistance organization or government if applicable cash grant noncash (book, FMV, assistance appraisal, other) ST. ALBAN'S EPISCOPAL CHURCH 885 SHORE RD CAPE ELIZABETH, ME 04107 01-0240618 RELIGIOUS ORGANI 6,500 0. X20 CHRISTIAN ST. ALBERT THE GREAT CHURCH 1395 GIRARD DR. X RELIGION SPIRITUAL LOUISVILLE, KY 40222 61-0568020 RELIGIOUS ORGANI 9,450 0 DEVELOPMENT ST. BERNADETTE CHURCH 6500 SAINT BERNADETTE AVE. X RELIGION SPIRITUAL PROSPECT, KY 40059-6543 61-0447247 RELIGIOUS ORGANI 27,500 0. DEVELOPMENT ST. BERNARD CATHOLIC CHURCH 7500 TANGELO DRIVE X RELIGION SPIRITUAL LOUISVILLE, KY 40228 61-0644954 RELIGIOUS ORGANI 0 DEVELOPMENT 49,694, ST. FRANCES OF ROME 2119 PAYNE STREET X RELIGION SPIRITUAL LOUISVILLE, KY 40206 61-0445829 RELIGIOUS ORGANI 0. DEVELOPMENT 6,750. ST. FRANCIS DESALES HIGH SCHOOL 425 W KENWOOD DR B EDUCATIONAL LOUISVILLE, KY 40214-2843 26-0689151 RELIGIOUS ORGANI 0. INSTITUTIONS 25,000 ST FRANCIS IN THE FIELDS EPISCOPAL CHURCH - 6710 WOLF PEN BRANCH ROAD - HARRODS CREEK, KY X RELIGION SPIRITUAL 61-0444805 RELIGIOUS ORGANI 40027 265 337. 0. DEVELOPMENT ST. FRANCIS OF ASSISI CHURCH 1960 BARDSTOWN ROAD X RELIGION SPIRITUAL LOUISVILLE, KY 40205 61-0444804 RELIGIOUS ORGANI 9,670. 0. DEVELOPMENT ST. JAMES CATHOLIC CHURCH 1826 EDENSIDE AVE. X RELIGION SPIRITUAL LOUISVILLE, KY 40204 61-0444806 RELIGIOUS ORGANI 0. DEVELOPMENT 10 000

Part II Continuation of Grants and Other							#N.B
(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. JAMES EPISCOPAL CHURCH PO BOX 507							
LA GRANGE, TX 78945	74-6195723	509(A)(1)	24,400.	0.			X21 PROTESTANT
ST. JAMES EPISCOPAL CHURCH PRESCHOOL - 156 N. MONROE ST., PO BOX 507 - LA GRANGE, TX 78945	20-0169354	RELIGIOUS ORGANI	12,000.	0.			X RELIGION SPIRITUAL DEVELOPMENT
ST. JOHN CENTER 700 EAST MUHAMMAD ALI BOULEVARD LOUISVILLE, KY 40202-3614	61-1135907	509(A)(1)	52,850.	0.			L41 TEMPORARY SHELTER FOR THE HOMELESS
ST. JOHN THE APOSTLE CHURCH 515 BROADWAY BRANDENBURG, KY 40108	61-0582893	RELIGIOUS ORGANI	19,000.	0.			X22 ROMAN CATHOLIC
ST. JOSEPH CHILDREN'S HOME 2823 FRANKFORT AVENUE LOUISVILLE, KY 40206	61-0475286		25,500.	0.			P73 GROUP HOME (LONG-TERM PRIMARILY ASSISTED LIVING)
ST. JOSEPH CHURCH PO BOX 548 BARDSTOWN, KY 40004	61-0485640	RELIGIOUS ORGANI	52,600.	0.			X RELIGION SPIRITUAL DEVELOPMENT
ST. JUDE CHILDREN'S RESEARCH HOSPITAL - 501 ST. JUDE PLACE - MEMPHIS, TN 38105	62-0646012	509(A)(1)	176,950.	0.			G98 PEDIATRICS
ST. LABRE INDIAN SCHOOL PO BOX 216 ASHLAND, MT 59003	81-0244542	509(A)(1)	5,350.	0.			B25 SECONDARY/HIGH SCHOOL
ST. LAWRENCE CATHOLIC CHURCH 1925 LEWISTON DRIVE LOUISVILLE, KY 40216	61-0447247	RELIGIOUS ORGANI	24,000.	0.			X RELIGION SPIRITUAL DEVELOPMENT

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government valuation non-cash assistance or assistance if applicable cash grant noncash (book, FMV, assistance appraisal, other) ST. MARGARET'S SCHOOL PO BOX 158 **B11 SINGLE ORGANIZATION** TAPPAHANNOCK, VA 22560 51-0206215 509(A)(1) 10,000 0. SUPPORT ST. MARK'S MEDICAL CENTER FOUNDATION - 1 SAINT MARKS PL - LA GRANGE, TX 78945 74-2795943 509(A)(3) TYPE I 10,000 0 T30 PUBLIC FOUNDATIONS ST. MARY OF THE KNOBS 5719 SAINT MARYS ROAD FLOYDS KNOBS, IN 47119 35-6033616 RELIGIOUS ORGANI 23,600 0. X20 CHRISTIAN ST. PATRICK ST. ANTHONY PARISH 920 FULTON STREET GRAND HAVEN, MI 49417 38-1575680 RELIGIOUS ORGANI 7,000. 0 X20 CHRISTIAN ST. PAUL PARISH SCHOOL 6901 DIXIE HWY. 61-0464179 RELIGIOUS ORGANI LOUISVILLE, KY 40258 0. 7,000. X22 ROMAN CATHOLIC ST. RAPHAEL THE ARCHANGEL CATHOLIC CHURCH - 2141 LANCASHIRE AVE. -X RELIGION SPIRITUAL LOUISVILLE, KY 40205 61-0549869 RELIGIOUS ORGANI 0. DEVELOPMENT 15,000 ST. STEPHEN CATHEDRAL 610 LOCUST ST. OWENSBORO KY 42301 61-0598513 509(A)(1) 7 100. 0. X22 ROMAN CATHOLIC ST. THERESA CHURCH 9245 RHODELIA RD PAYNEVILLE, KY 40157 61-0447247 509(A)(1) 42,500. 0. X22 ROMAN CATHOLIC ST. VINCENT DE PAUL SOCIETY COUNCIL OF LOUISVILLE - ATTN: ACCOUNTING DEPT., P.O. BOX 17126 P85 HOMELESS SERVICES/CENTERS LOUISVILLE, KY 40217-0126 61-0727110 509(A)(1) 0. 47 550.

Schedule I (Form 990) DEPOSITORY, INC. 31-1140889

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government valuation non-cash assistance or assistance if applicable cash grant noncash (book, FMV, assistance appraisal, other) ST. WILLIAM CHURCH 1226 W. OAK STREET X RELIGION SPIRITUAL DEVELOPMENT LOUISVILLE, KY 40210 61-0447247 RELIGIOUS ORGANI 9,800 0. ST. XAVIER HIGH SCHOOL 1609 POPLAR LEVEL ROAD LOUISVILLE, KY 40217 61-0447247 509(A)(1) 94,333 0 B25 SECONDARY/HIGH SCHOOL STEPHEN SILLER TUNNEL TO TOWERS FOUNDATION - 2361 HYLAN BLVD, , -B82 SCHOLARSHIPS STUDENT STATEN ISLAND, NY 10306 02-0554654 509(A)(1) 155,190 0. FINANCIAL AID AWARDS STRATFORD HALL AKA STRATFORD HALL, 483 GREAT HOUSE A80 HISTORICAL SOCIETIES STRATFORD, VA 22558 54-0536105 509(A)(1) 40,500. 0 AND RELATED ACTIVITIES TEACH KENTUCKY 907 BARRET AVE B03 PROFESSIONAL 20-4009920 509(A)(1) 0. SOCIETIES & ASSOCIATIONS LOUISVILLE, KY 40204 49,460 TEXAS A & M FOUNDATION 401 GEORGE BUSH DRIVE B EDUCATIONAL COLLEGE STATION TX 77840 74-2245072 509(A)(1) 0. INSTITUTIONS 20,000 TEXAS CZECH HERITAGE AND CULTURAL CENTER - PO BOX 6 - LA GRANGE, TX A23 CULTURAL/ETHNIC AWARENESS 78945 74-2832358 509(A)(1) 12 000 0. THE BAIL PROJECT PO BOX 102592 PASADENA, CA 91189 81-4985512 509(A)(1) 10,000. 0. 144 PRISON ALTERNATIVES B28 SPECIAL ED THE DE PAUL SCHOOL INSTITUTIONS/ SCHOOLS FOR VISUALLY OR HEARING 1925 DUKER AVENUE LOUISVILLE, KY 40205 61-0711082 509(A)(1) 7 000 0. IMPAIRED LEARNING

Schedule I (Form 990)

Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa I	ırt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE HOPE BUSS INC 3131 S 2ND ST, SUITE 352 LOUISVILLE, KY 40208	83-2485907	509(A)(1)	19,800.	0.			P99 HUMAN SERVICES-MULTIPURPOSE & OTHER N.E.C.*
THE NATURE CONSERVANCY - KENTUCKY CHAPTER - 114 WOODLAND AVE - LEXINGTON, KY 40502	53-0242652	509(A)(1)	24,760.	0.			C99 ENVIRONMENTAL QUALITY PROTECTION AND BEAUTIFICATION N.E.C.*
THE PARKLANDS OF FLOYD'S FORK 471 W. MAIN ST #202 LOUISVILLE, KY 40202	20-1780317	509(A)(1)	26,625.	0.			N32 PARKS AND PLAYGROUNDS
THE PRODUCERS INC 1517 S 2ND ST LOUISVILLE, KY 40208	31-1027597	509(A)(1)	8,000.	0.			A6E PERFORMING ARTS SCHOOLS
THE RUSSELL THEATRE CORPORATION P O BOX 371, , MAYSVILLE, KY 41056	61-1316237	509(A)(1)	5,700.	0.			A11 SINGLE ORGANIZATION SUPPORT
THE SALVATION ARMY - LOUISVILLE AREA COMMAND - 911 S. BROOK ST - LOUISVILLE, KY 40203	58-0660607	509(A)(1)	33,550.	0.			P24 SALVATION ARMY
THE TEMPLE-CONGREGATION ADATH ISRAEL BRITH SHOLOM - ATTN: CRAIG GOLDSTEIN, 5101 U.S. HIGHWAY 42 - LOUISVILLE, KY 40241	61-0918772	509(A)(1)	39,884.	0.			X RELIGION SPIRITUAL DEVELOPMENT
TIDES FOUNDATION P.O. BOX 399389 SAN FRANCISCO, CA 94139	51-0198509	509(A)(1)	50,000.	0.			T30 PUBLIC FOUNDATIONS
TREESLOUISVILLE PO BOX 5816 LOUISVILLE, KY 40255	47-3739795	509(A)(1)	285,180.	0.			C ENVIRONMENTAL QUALITY PROTECTION BEAUTIFICATION

61-6001218 170(C)(1)

31-1140889 DEPOSITORY, INC. Schedule I (Form 990) Page 1 Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) TRINITY HIGH SCHOOL 4011 SHELBYVILLE ROAD B11 SINGLE ORGANIZATION LOUISVILLE, KY 40207 61-1256093 RELIGIOUS ORGANI 14,450 0. SUPPORT TRINITY HIGH SCHOOL FOUNDATION INC. - 4011 SHELBYVILLE RD. -B11 SINGLE ORGANIZATION LOUISVILLE, KY 40207 31-1105966 509(A)(1) 42,500 0 SUPPORT TRINITY UNITED METHODIST CHURCH 26 W. 3RD MAYSVILLE, KY 41056 61-0534628 RELIGIOUS ORGANI 37,100 0. X20 CHRISTIAN TRI-STATE HINDU TEMPLE 6044 VANN RD 15,000. NEWBURGH, IN 47630 20-3555082 509(A)(1) 0 X20 CHRISTIAN TRUNACY, INC. 6010 BROWNSBORO PARK BLVD, SUITE C 84-3086582 509(A)(2) LOUISVILLE, KY 40207 0. 25,000 A31 FILM VIDEO TURTLE WING FOUNDATION 1203 S KESSLER AVE 011 STNGLE ORGANIZATION SCHULENBURG, TX 78956 45-3822942 509(A)(1) 0. SUPPORT 12,000 UNION OF CONCERNED SCIENTISTS 2 BRATTLE SOUARE SUITE 6 C01 ALLIANCE/ADVOCACY 04-2535767 509(A)(1) **ORGANIZATIONS** CAMBRIDGE MA 02138 5 200 0. UNITED WAY OF GREATER MILWAUKEE & WAUKESHA COUNTY INC - PO BOX 88988 P20 HUMAN SERVICE - MILWAUKEE, WI 53288 39-0806190 509(A)(1) 12,750, 0. **ORGANIZATIONS**

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0.

B40 HIGHER ED INSTITUTIONS

UNIVERSITY OF KENTUCKY

LEXINGTON, KY 40523

UK PHILANTHROPY, PO BOX 23552

31-1140889

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF LOUISVILLE ATHLETIC							
ASSOCIATION INC ATHLETIC DEPT.							D TRUGATIONAL
SAC BLDG, 2100 S. FLOYD STREET - LOUISVILLE, KY 40208	21 1106041	509(A)(3) TYPE I	20,000.	0.			B EDUCATIONAL INSTITUTIONS
LOUISVILLE, RI 40200	31-1100941	509(A)(3) TIPE T	20,000.	0.			INSTITUTIONS
UNIVERSITY OF LOUISVILLE							
FOUNDATION, INC 215 CENTRAL AVE							B11 SINGLE ORGANIZATION
UNIT 212 - LOUISVILLE, KY 40208	23-7078461	509(A)(1)	629,870.	0.			SUPPORT
			,				
UNIVERSITY OF TEXAS FOUNDATION							
9011 MOUNTAIN RIDGE., SUITE 150							B11 SINGLE ORGANIZATION
AUSTIN, TX 78759	74-1587488	509(A)(1)	6,200.	0.			SUPPORT
UOFL HEALTH - BROWN CANCER CENTER							
C/O UOFL FOUNDATION, PO BOX 772050							L
CHICAGO, IL 60677	61-1293786	509(A)(1)	6,200.	0.			E22 HOSPITAL (GENERAL)
UP FOR WOMEN AND CHILDREN							
425 S 2ND STREET SUITE 100							P85 HOMELESS
LOUISVILLE, KY 40202	82-3049204	509(2)(1)	12,950.	0.			SERVICES/CENTERS
LOOISVILLE, KI 40202	02 3043204	303(11)(1)	12,550.	•			T99 OTHER PHILANTHROPY
VANGUARD CHARITABLE							VOLUNTARISM AND
P.O. BOX 9509							GRANTMAKING FOUNDATIONS
WARWICK, RI 02889	23-2888152	509(A)(1)	50,000.	0.			N.E.C.*
,			, , , , , , , , , , , , , , , , , , , ,				
VINCENT CLUB							
71 BRIMMER ST.							E11 SINGLE ORGANIZATION
BOSTON, MA 02108	04-2105799	509(A)(2)	6,000.	0.			SUPPORT
VOLUNTEERS OF AMERICA MID-STATES							
AKA VOLUNTEERS OF AMERICA OF							
KENTUCKY, 570 S FOURTH ST #100 -							
LOUISVILLE, KY	61-0480950	509(A)(1)	13,450.	0.			P26 VOLUNTEERS OF AMERIC
WARRIOR 180 FOUNDATION INC.							
PO BOX 855							F30 MENTAL HEALTH
ABERDEEN, NC 28315	47-5218830	509(A)(1)	8,900.	0.			TREATMENT

(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
WASHINGTON UNIVERSITY MSC 1082-414-2555, 7425 FORSYTH BLV	7						B43 UNIVERSITY OR
ST. LOUIS, MO 63105-2161	43-0653611	509(A)(1)	25,100.	0.			TECHNOLOGICAL
WATER WITH BLESSINGS 1902 CAMPUS PLACE, STE 11 LOUISVILLE, KY 40299	37-1639872	509(A)(1)	34,600.	0.			M99 OTHER PUBLIC SAFETY DISASTER PREPAREDNESS AN RELIEF N.E.C.*
WATERFRONT BOTANICAL GARDENS PO BOX 5056 LOUISVILLE, KY 40255	61-1297238	509(A)(1)	30,582.	0.			C40 BOTANICAL HORTICULTURAL AND LANDSCAPE SERVICES
WATERFRONT DEVELOPMENT CORPORATION 129 RIVER RD. LOUISVILLE, KY 40202	37-1642204	170(C)(1)	5,600.	0.			N RECREATION SPORTS LEISURE ATHLETICS
WATERSTEP AKA: EDGE OUTREACH INC, 625 MYRTLE LOUISVILLE, KY 40208	61-1262016	509(2)(1)	30,450.	0.			M20 DISASTER PREPAREDNES
WAVE HILL INCORPORATED 675 W. 252ND ST. BRONX, NY 10471	13-6178903		8,000.	0.			C40 BOTANICAL HORTICULTURAL AND LANDSCAPE SERVICES
WAYSIDE CHRISTIAN MISSION PO BOX 7249 LOUISVILLE, KY 40257	61-0667139	509(A)(1)	38,300.	0.			P20 HUMAN SERVICE ORGANIZATIONS
WELLSPRING INC. P.O. BOX 1927 LOUISVILLE, KY 40201	31-1020023	509(A)(2)	15,000.	0.			F33 GROUP HOME RESIDENTIAL TREATMENT FACILITY-MENTAL HEALTH RELATED
WEST END PREPARATORY SCHOOL 3628 VIRGINIA AVENUE LOUISVILLE, KY 40211	04-3798875	509(A)(1)	147,600.	0.			B24 PRIMARY/ELEMENTARY SCHOOL

(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
WESTPORT ROAD CHURCH OF CHRIST							
4500 WESTPORT ROAD							
LOUISVILLE, KY 40207	61-0661484	RELIGIOUS ORGANI	57,000.	0.			X20 CHRISTIAN
WHAS CRUSADE FOR CHILDREN INC.							
520 W. CHESTNUT ST.							 P30 CHILDREN'S AND YOUTH
LOUISVILLE, KY 40202	23-7075524	509(A)(1)	10,550.	0.			SERVICES
WORLD CENTRAL KITCHEN INC.			,				
ATTN: DONOR SERVICES TEAM, 200							
MASSACHUSETTS AVE NW, 7TH FLOOR -							
WASHINGTON,	27-3521132	509(A)(1)	6,900.	0.			Q33 INTERNATIONAL RELIEF
YALE UNIVERSITY CONTRIBUTION PROCESSING, P.O. BOX 2 NEW HAVEN, CT 06521-2038	06-0646973	509(A)(1)	11,200.	0.			B43 UNIVERSITY OR TECHNOLOGICAL
YAMPA VALLEY COMMUNITY FOUNDATION PO BOX 881869 STEAMBOAT SPRINGS, CO 80488	84-0794536	509/7)/1)	13,800.	0.			T31 COMMUNITY FOUNDATION
STEAMBOAT SPRINGS, CO 00400	04-0794550	509(A)(1)	13,800.	0.			TST COMMONITY FOUNDATION
YEW DELL INC. 6220 OLD LAGRANGE ROAD CRESTWOOD, KY 40014	61-1390688	509(A)(1)	448,750.	0.			C30 NATURAL RESOURCE CONSERVATION AND PROTECTION
YMCA OF GREATER LOUISVILLE METROPOLITAN OFFICE, 545 S. 2ND ST							
LOUISVILLE, KY 40202	61-0444843	509(A)(2)	23,130.	0.			P27 YMCA YWCA YWHA YMHA
YOU DECIDE KENTUCKY INC. 119 EVERGREEN RD., #43482 LOUISVILLE, KY 40243	86-1973146	509(A)(1)	50,000.	0.			B99 EDUCATION N.E.C.*

Schedule I (Form 990) 2022

DEPOSITORY, INC.

(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
t IV Supplemental Information. Provide the informat	ion required in Part I, lin	e 2; Part III, column	n (b); and any other ac	I Iditional information.	
F I, LINE 2:					
ORGANIZATION USES GUIDESTAR.ORG TO CONFIR	M THAT THE RECIPIE	NT			
NIZATIONS ARE IN GOOD STANDING PRIOR TO M	AKING THE DONATION	. WHEN THE			
ATION IS SENT THE FOLLOWING INFORMATION IS	PROVIDED TO EACH	GRANT			
IPIENT:					
DEPOSITING THIS CHECK, YOUR ORGANIZATION (CERTIFIES THAT NO	TNDTVTDUALS			
ENTITIES CONNECTED WITH THE DONOR RECEIVED					
MILITED COMMECTED WITH THE DONOR RECEIVED	THI THIGIDUE DENE	1110, 30000,			

Schedule I (Form 990) 2022

31-1140889

THE COMMUNITY FOUNDATION OF LOUISVILLE

Schedule I (Form 990)	DEPOSITORY, II	NC.		31-1140889	Page 2
Part IV Supplemental	Information				
PURCHASED AT AUCTION).	YOUR ORGANIZATION A	ALSO CERTIFIES IT	CONTINUES TO BE		
PUBLICLY SUPPORTED AND	EXEMPT UNDER IRS CO	DDE SECTION 501(C)	(3). AS A FORCE		
FOR GOOD, THE COMMUNITY	FOUNDATION OF LOUI	SVILLE IS PROUD TO	O SUPPORT THE		
WORK OF YOUR ORGANIZATI	ON. IF YOU HAVE ANY	QUESTIONS REGARD	ING THIS GRANT,		
PLEASE CONTACT US AT 50	2-585-4649 OR GRANT	S@CFLOUISVILLE.OR	G."		
IN ADDITION, WHEN THE D	ONOR MAKES THE CONT	RIBUTION TO THE D	EPOSITORY, THE		
DONOR ALSO AGREES THAT	THEY ARE NOT RECEIV	ING ANY TANGIBLE	BENEFIT, GOOD OR		
SERVICE.					

SCHEDULE J (Form 990)

Compensation Information

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

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

Attach to Form 990.

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

2022

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

THE COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY, INC.

Employer identification number 31-1140889

Pa	art I Questions Regarding Compensation	·		
			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to	o or for a person listed on Form 990,		
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information	regarding these items.		
	First-class or charter travel Housing a	Illowance or residence for personal use		
	Travel for companions Payments	for business use of personal residence		
	Tax indemnification and gross-up payments Health or	social club dues or initiation fees		
	Discretionary spending account Personal s	services (such as maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written p	policy regarding payment or		
	reimbursement or provision of all of the expenses described above? If "No," con	nplete Part III to explain1b		
2	Did the organization require substantiation prior to reimbursing or allowing expe	nses incurred by all directors,		
	trustees, and officers, including the CEO/Executive Director, regarding the items	checked on line 1a?2		
3	Indicate which, if any, of the following the organization used to establish the con	npensation of the organization's		
	CEO/Executive Director. Check all that apply. Do not check any boxes for method	ods used by a related organization to		
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written er	nployment contract		
	Independent compensation consultant Compens	ation survey or study		
	Form 990 of other organizations Approval	by the board or compensation committee		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, v	vith respect to the filing		
	organization or a related organization:			
а	a Receive a severance payment or change-of-control payment?	4a		Х
b	p Participate in or receive payment from a supplemental nonqualified retirement p	an? 4b		Х
С	Participate in or receive payment from an equity-based compensation arrangement	ent? 4c		Х
	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	e 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:			
а	The organization?	<u>5a</u>		Х
b	Any related organization?	<u>5b</u>		Х
	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:			
а	The organization?	6a_		X
b	Any related organization?	<u>6b</u>		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	, , , , , ,			
	not described on lines 5 and 6? If "Yes," describe in Part III			Х
8	, , , , , , , , , , , , , , , , , , , ,			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Ye	es," describe in Part III 8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption pro	ocedure described in		
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2022

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	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) RONALD GALLO	(i)	0.	0.	0.	0.	0.	0.	0.
PRESIDENT & CEO	(ii)	311,423.	0.	0.	8,536.	687.	320,646.	0.
(2) MATTHEW L. BACON	(i)	0.	0.	0.	0.	0.	0.	0.
VP & CFO	(ii)	199,939.	0.	0.	5,782.	12,997.	218,718.	0.
(3) HEATHER CASH	(i)	0.	0.	0.	0.	0.	0.	0.
VP, DEVELOPMENT & STEWARDSHIP	(ii)	136,257.	0.	0.	4,217.	9,649.	150,123.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

DEPOSITORY, INC.

Page 3

Part III Supplemental information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 3:
THE RELATED ORGANIZATION USES THE FOLLOWING TO ESTABLISH COMPENSATION OF
THE CEO/EXECUTIVE DIRECTOR:
- HUMAN RESOURCES COMMITTEE
- FORM 990 OF OTHER ORGANIZATIONS
- COMPENSATION SURVEY OR STUDY
- APPROVAL BY THE BOARD OR HUMAN RESOURCES COMMITTEE

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

THE COMMUNITY FOUNDATION OF LOUISVILLE

DEPOSITORY, INC.

Employer identification number 31-1140889

Pai	t I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu		_	3
1	Art - Works of art			-				
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	272	8,063,557.	FMV AT DATE OF G	IFT		
10	Securities - Closely held stock			, ,				
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27								
28	Other () Cher ()							
29	Number of Forms 8283 received by the organization	ation during	the tay year for co	ontributions				
	for which the organization completed Form 828						0	
	To whom the organization completed form ozo	0, 1 ait v, D	once / tolknowledg	<u>20</u>			Yes	No
30a	During the year, did the organization receive by	contributio	n any property rep	orted in Part I lines 1 throug	h 28 that it		100	110
oou	must hold for at least 3 years from the date of the			· · · · · · · · · · · · · · · · · · ·				
	exempt purposes for the entire holding period?					30a		Х
b	If "Yes," describe the arrangement in Part II.					ooa		
31	Does the organization have a gift acceptance p	olicy that re	auires the review (of any nonstandard contribut	ions?	31	х	
	Does the organization hire or use third parties of							
JŁd			-			32a		х
h	contributions? If "Yes," describe in Part II.					UZa		
33	If the organization didn't report an amount in co	olumn (c) for	a type of property	for which column (a) is che	rked			
55	describe in Part II.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	a type of property	101 WINOTI COLUITIII (a) 13 CHEC	nou,			

LHA

SCHEDULE O (Form 990)

Department of the Treasury

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.

Attach to Form 990 or Form 990-EZ.

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

2022 Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service

Name of the organization

THE COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY. INC.

Employer identification number 31-1140889

PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: AND OPEN OPPORTUNITY FOR ALL. FORM 990, PART VI, SECTION B, LINE 11B: A DRAFT OF THE RETURN IS REVIEWED FIRST BY INTERNAL MANAGEMENT. AFTER INTERNAL MANAGEMENT HAS REVIEWED THE RETURN AND ANY CHANGES ARE MADE A DRAFT IS PROVIDED TO THE FINANCE COMMITTEE FOR REVIEW AND A COPY IS PROVIDED TO THE ENTIRE BOARD. ONCE THE COMMENTS FROM THE BOARD ARE REVIEWED, THE FINAL DRAFT OF THE RETURN IS PREPARED AND SIGNED BY THE EXECUTIVE VICE PRESIDENT & CFO. FORM 990, PART VI, SECTION B, LINE 12C: OFFICERS DIRECTORS AND KEY EMPLOYEES MAY NOT ENGAGE IN ACTIVITIES THAT MIGHT INTERFERE WITH THE DISCHARGE OF THEIR RESPONSIBILITY OR IN TRANSACTIONS THAT REASONABLY MIGHT AFFECT THE JUDGMENT EXERCISE ON BEHALF OF THE ORGANIZATION. IF THERE HAVE BEEN ANY CHANGES THAT MAY BE A POTENTIAL CONFLICT OF INTEREST, INDIVIDUALS SHOULD NOTIFY THE PRESIDENT & CEO. OFFICERS, DIRECTORS AND KEY EMPLOYEES ARE REQUIRED TO READ AND SIGN A CONFLICT OF INTEREST DISCLOSURE FORM FROM TIME TO TIME WHICH THE ORGANIZATION WILL KEEP ON FILE. OFFICERS, DIRECTORS AND KEY EMPLOYEES ARE EXPECTED AT ALL TIMES TO USE GOOD JUDGMENT AND TO ADHERE TO HIGH ETHICAL STANDARDS. IN DOING SO, THEY WILL CONDUCT THEIR AFFAIRS IN SUCH A MANNER AS TO AVOID ANY ACTUAL OR POTENTIAL CONFLICT OF INTEREST.

<u>Schedule O (Form 990) 2022</u> Page **2**

Schedule O (Form 990) 2022	Page 2
Name of the organization THE COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY, INC.	Employer identification number 31-1140889
THE ORGANIZATION BELIEVES THAT ITS OFFICERS, DIRECTORS AND KEY EMPLOYEES	
SHOULD NOT BE INHIBITED SOLELY BECAUSE OF POTENTIAL CONFLICTS OF INTEREST.	
IN FACT, THE ORGANIZATION BELIEVES THAT CONFLICTS OF INTEREST CAN BEST BE	
HANDLED THROUGH FULL DISCLOSURE OF SUCH INTERESTS, TOGETHER WITH	
NONINVOLVEMENT IN ANY VOTE WHERE SUCH A CONFLICT EXISTS.	
EACH OFFICER, DIRECTOR AND KEY EMPLOYEE IS REQUESTED TO PROVIDE ANNUALLY TO	_
THE PRESIDENT OF CFL A LIST OF OFFICES AND DIRECTORSHIPS HE OR SHE HOLDS IN	
CHARITABLE AND BUSINESS ORGANIZATIONS, AND TO IDENTIFY HIS OR HER PLACE OF	
EMPLOYMENT OR PRINCIPAL BUSINESS ACTIVITY.	
OFFICERS, DIRECTORS AND KEY EMPLOYEES SHOULD DISCLOSE A CONFLICT OF	
INTEREST:	
-PRIOR TO VOTING ON OR OTHERWISE DISCHARGING HIS OR HER DUTIES.	
-PRIOR TO ENTERING INTO ANY CONTRACT WHICH COMES BEFORE THE BOARD OR ANY	
COMMITTEE;	
-AS SOON AS POSSIBLE AFTER THE INDIVIDUAL LEARNS OF A CONFLICT OF INTEREST	
IN ANY OTHER CONTEXT.	
DISCLOSURE SHOULD BE MADE TO THE BOARD CHAIR, PRESIDENT OF CFL, OR IN THE	
CASE OF A COMMITTEE, TO THE CHAIRPERSON OF THAT COMMITTEE. THE MINUTES OF	
THE MEETING SHOULD REFLECT THAT APPROPRIATE DISCLOSURE WAS MADE, AND THAT	
THE INTERESTED PARTY ABSTAINED FROM VOTING.	
FORM 990, PART VI, SECTION B, LINE 15:	
THE ORGANIZATION DOES NOT HAVE ANY EMPLOYEES CURRENTLY; HOWEVER, THEY	
FOLLOW THE POLICIES AND PROCEDURES FOR DETERMINING COMPENSATION AS	

<u>Schedule O (Form 990) 2022</u> Page **2**

Schedule O (Form 990) 2022	Page 2
Name of the organization THE COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY, INC.	Employer identification number 31-1140889
ESTABLISHED BY THE COMMUNITY FOUNDATION OF LOUISVILLE, INC. THE COMMUNITY	
FOUNDATION OF LOUISVILLE, INC. HAS A HUMAN RESOURCES COMMITTEE THAT	
ANNUALLY REVIEWS INDUSTRY SURVEY INFORMATION TO DETERMINE A FAIR AND	
REASONABLE COMPENSATION FOR THE OFFICERS AND KEY EMPLOYEES. THE PRESIDENT'S	
AND OFFICERS' COMPENSATION IS THEN APPROVED BY THE HUMAN RESOURCES	
COMMITTEE. COMPENSATION FOR ALL EMPLOYEES IS APPROVED BY THE HUMAN	
RESOURCES COMMITTEE AND BOARD.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES ITS FINANCIAL STATEMENTS, CONFLICT OF INTEREST	
POLICY, AND GOVERNING DOCUMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.	
FORM 990, PART XII, LINE 2C:	
THE PROCESS HAS NOT CHANGED FROM PRIOR YEAR.	
THE COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY, INC. IS AUDITED AS	
PART OF THE COMMUNITY FOUNDATION OF LOUISVILLE, INC. COMBINED GROUP.	
THE COMMUNITY FOUNDATION OF LOUISVILLE DEPOSITORY, INC. IS INCLUDED IN	
THE COMMUNITY FOUNDATION OF LOUISVILLE, INC. AND AFFILIATES COMBINED	
FINANCIAL STATEMENTS.	
THE ORGANIZATION HAS AN AUDIT COMMITTEE THAT OVERSEES THE AUDIT OF THE	
FINANCIAL STATEMENTS AND THE SELECTION OF THE INDEPENDENT AUDITOR FOR	
THE COMBINED GROUP.	

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

2022

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

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

Employer identification number 31-1140889

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	Section 5 contr enti	rolled
				501(c)(3))		Yes	No
THE COMMUNITY FOUNDATION OF LOUISVILLE, INC.							l
- 31-0997017, 325 W. MAIN STREET, SUITE	FACILITATE INDIVIDUAL						ĺ
1110, LOUISVILLE, KY 40202	DONORS' CHARITABLE GIVING	KENTUCKY	501(C)(3)	7	N/A		Х
FELIX E. MARTIN JR. FOUNDATION, INC -	TYPE I SUPPORTING				COMMUNITY		1
26-2193468, 325 W. MAIN STREET, SUITE 1110,	ORGANIZATION - MAINTAIN				FOUNDATION OF		l
LOUISVILLE, KY 40202	AND RECEIVE CONTRIBUTIONS	KENTUCKY	501(C)(3)	11 TYPE 1	LOUISVILLE, INC.		Х
THE COMMUNITY FOUNDATION OF LOUISVILLE					COMMUNITY		1
CORPORATE DEPOSITORY, INC 61-11009, 325	FACILITATE INDIVIDUAL				FOUNDATION OF		l
W. MAIN STREET, SUITE 1110, LOUISVILLE, KY	DONORS' CHARITABLE GIVING	KENTUCKY	501(C)(3)	7	LOUISVILLE, INC.		Х
THE REAL ESTATE ASSET LEGACY FOUNDATION OF	TYPE I SUPPORTING				COMMUNITY		1
KENTUCKY, INC - 26-2417672, 325 W. MAIN	ORGANIZATION - MAINTAIN				FOUNDATION OF		l
STREET, SUITE 1110, LOUISVILLE, KY 40202	AND RECEIVE CONTRIBUTIONS	KENTUCKY	501(C)(3)	11 TYPE 1	LOUISVILLE, INC.		Х

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

Schedule R (Form 990) 2022

Schedule R (Form 990) DEPOSITORY, INC. 31-1140889

(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) 512(b)(13) rolled zation?
LOUISVILLE PRESERVATION FUND, INC	TYPE I SUPPORTING				COMMUNITY	165	140
46-2871014, 323 W. BROADWAY, SUITE 700,					FOUNDATION OF		
LOUISVILLE, KY 40202	AND RECEIVE CONTRIBUTIONS	KENTUCKY	501(C)(3)	11 TYPE 1	LOUISVILLE, INC.		х
	4						
	-						
	-						
	-						
	1						
	_						
	4						
	-						
	-						
	1						
	1						
	7						
	<u> </u>						

31-1140889

Page 2 Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. Part III

organizations treated as a partnership during the tax year.											
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(I	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	1 ' '	ortionate itions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera manag partne	or Percentage ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes I	lo
											+
											1
_											
-											
							<u> </u>				

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	(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		tion b)(13) rolled tity?
		country)		,				Yes	No
	-								
-	-								
-									
	-								

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DEPOSITORY, INC.

art V	Transactions With Related Organizations.	Complete if the organization answered	"Yes" on Form 990,	Part IV, line 34, 35b, or 36.
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Not	ote: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No	
1	During the tax year, did the organization engage in any of the following transactions with one or	more re	lated organizations listed in	n Parts II-IV?				
а	a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		Х	
	Gift, grant, or capital contribution to related organization(s)							
	c Gift, grant, or capital contribution from related organization(s)							
	d Loans or loan guarantees to or for related organization(s)				1d		Х	
	e Loans or loan guarantees by related organization(s)				1e		Х	
f	f Dividends from related organization(s)				1f		Х	
g	g Sale of assets to related organization(s)				1g		Х	
	h Purchase of assets from related organization(s)				1h		Х	
i	i Exchange of assets with related organization(s)				1i		Х	
j	j Lease of facilities, equipment, or other assets to related organization(s)				1j		Х	
k	k Lease of facilities, equipment, or other assets from related organization(s)				1k		Х	
- 1	Performance of services or membership or fundraising solicitations for related organization(s)				11		Х	
m	m Performance of services or membership or fundraising solicitations by related organization(s)				1m		Х	
n	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Х		
0	Sharing of paid employees with related organization(s)				10	Х		
р	p Reimbursement paid to related organization(s) for expenses				1 p		Х	
q	q Reimbursement paid by related organization(s) for expenses				1q		Х	
r	r Other transfer of cash or property to related organization(s)				1r		Х	
s	s Other transfer of cash or property from related organization(s)				1s		X	
2	If the answer to any of the above is "Yes," see the instructions for information on who must com	plete th	is line, including covered re	elationships and transaction thresholds.				
	(a) (b) Name of related organization Transaction type (a-st		(c) Amount involved	(d) Method of determining amount invo	olved			
1)								
2)								
3)								
4)								

<u>(5)</u>

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h	1)	(i)	(i)	(k)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)		Are all partners see 501(c)(3) orgs.?		Share of end-of-year assets	Dispretion allocat	opor- late tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana parti	ral or laging ner?	Percentage ownership
			,	163 140			103	140	,	103	NO	
							\vdash					
							\Box					
							Н				-	
							Ш					
							Ш					

THE COMMUNITY FOUNDATION OF LOUISVILLE

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Part VII Supplemental Information		
Provide additional information for responses to questions on Schedule R. See instructions.		
PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:		
NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:		
THE COMMUNITY FOUNDATION OF LOUISVILLE CORPORATE		
THE COMMONITY POUNDATION OF HOUSTIBLE CONTONATE		
DEPOSITORY, INC.		
EIN: 61-1100993		
325 W. MAIN STREET, SUITE 1110		
LOUISVILLE, KY 40202		