Department of the Treasury

Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

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.



AF	A For the 2018 calendar year, or tax year beginning and ending							
B c	heck if pplicabl	C Name of organization	D Employer identific	cation number				
	Addre chang	MUSKINGUM COUNTY COMMUNITY FOUNDATION						
	Name			31-1	147022			
	Initial return		Room/suite					
	Final return	534 DIITNAM AVENIIE			453-5192			
	termir ated			<b>G</b> Gross receipts \$	8,818,667.			
	Amen return			H(a) Is this a group re				
	Applic tion	F Name and address of principal officer: BRIAN WAGNER		for subordinates				
	pendi	<sup>ng</sup> SAME AS C ABOVE		H(b) Are all subordinates in				
11	ax-ex	empt status: 🗴 501(c)(3) 501(c) ( )◀ (insert no.) 4947(a)(1) d	or 527	If "No," attach a	list. (see instructions)			
<u>ا ا</u>	Vebsi	te: ► WWW.MCCF.ORG		H(c) Group exemption	n number 🕨			
		f organization: 🚺 Corporation Trust Association Other 🕨	L Year	of formation: 1985 N	State of legal domicile: OH			
Pa	art I	Summary						
đ	1	Briefly describe the organization's mission or most significant activities: $\underline{TO}$ II	MPROVE	THE QUALITY	OF LIFE			
nc.		AND SERVE THE CHARITABLE NEEDS OF THE COM						
Activities & Governance	2	Check this box I if the organization discontinued its operations or dispos	sed of more	than 25% of its net ass				
ove	3			3	19			
ত		Number of independent voting members of the governing body (Part VI, line 1b)			19			
es		Total number of individuals employed in calendar year 2018 (Part V, line 2a)			9			
iviti		Total number of volunteers (estimate if necessary)			41			
Act					0.			
	b	Net unrelated business taxable income from Form 990-T, line 38			0.			
				Prior Year	Current Year			
ne	8	Contributions and grants (Part VIII, line 1h)		1,483,543. 228,693.	1,848,035.			
Revenue	9	Program service revenue (Part VIII, line 2g)		1,100,263.	<u>246,506.</u> 1,587,059.			
Be		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		18,112.				
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,830,611.	<u>34,799.</u> 3,716,399.			
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		998,652.	1,193,241.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		990,052.	0.			
	14 15	Benefits paid to or for members (Part IX, column (A), line 4)		316,835.	380,831.			
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
en:	l lua	Total fundraising expenses (Part IX, column (A), line 11e)	21.	0.				
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		761,844.	668,534.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,077,331.	2,242,606.			
	19	Revenue less expenses. Subtract line 18 from line 12		753,280.	1,473,793.			
or Solution				ginning of Current Year	End of Year			
ets (	20	Total assets (Part X, line 16)		31,765,771.	30,671,993.			
Assets ( Ralanc	21	Total liabilities (Part X, line 26)		3,656,395.	3,408,575.			
Net	1	Net assets or fund balances. Subtract line 21 from line 20		28,109,376.	27,263,418.			
Pa	art II	Signature Block		, , , , , , ,	, , , , ,			
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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer	Date								
Here	BRIAN WAGNER, CEO									
	Type or print name and title									
-	Print/Type preparer's name Preparer's signature Date	Check PTIN								
Paid	MARY ELIZABETH WRIGHT, CP MARY ELIZABETH WRIGH	self-employed P00099212								
Preparer	Firm's name 🕨 REA & ASSOCIATES, INC.	Firm's EIN <b>34-1310124</b>								
Use Only	Firm's address 941 STEUBENVILLE AVE., P.O. BOX 820									
	CAMBRIDGE, OH 43725-0820	Phone no. (740) - 432 - 5658								
May the IF	May the IRS discuss this return with the preparer shown above? (see instructions)									
832001 12-3	B32001 12-31-18 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2018)									
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SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	990 (2018) MUSKINGUM COUNTY COMMUNITY FOUNDATION 31-1147022 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
1	Briefly describe the organization's mission:
	THE MISSION OF MUSKINGUM COUNTY COMMUNITY FOUNDATION (MCCF) IS TO
	IMPROVE QUALITY OF LIFE
	IN THE COMMUNITY BY NURTURING OPPORTUNITIES AND SERVING NEEDS THROUGH
	COLLABORATION AND
2	Did the organization undertake any significant program services during the year which were not listed on the
~	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
•	
3	
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$973,524. including grants of \$1,005,541. ) (Revenue \$200,954. )
	FUNDING OF VARIOUS COMMUNITY PROJECTS AND SUPPORT OF NUMEROUS COMMUNITY
	AND CHARITABLE ORGANIZATIONS INCLUDING:
	- FOOTBALL FIELD TURF, STADIUM IMPROVEMENTS AND OTHER PROJECTS FOR AREA
	SCHOOL DISTRICTS
	- WORKING WITH THE LOCAL SENIOR CITIZENS CENTER TO BENEFIT SENIOR
	CITIZENS IN NEED. ONCE APPLICATIONS ARE APPROVED, PAYMENTS ARE
	SUBMITTED DIRECTLY TO THE VENDORS FOR RENT, UTILITY BILLS, MEDICINES
	ETC.
	- PROVIDING FUNDING TO SUPPORT LOCAL LITERACY & ART PROGRAMS
	- FINANCIAL SUPPORT FOR RESEARCH FOR VARIOUS MEDICAL ISSUES.
	- FISCAL AGENT FOR LOCAL ARTS SHOW AND RESIDUAL SUPPORT OF CERAMICS
	SHOW PREVIOUSLY HELD
4b	(Code:) (Expenses \$ 187,700. including grants of \$ 187,700. ) (Revenue \$ 49,301. )
чы	FUNDING FOR SCHOLARSHIP CENTRAL PROGRAM TO ASSIST LOCAL STUDENTS AND
	THEIR FAMILIES TO PREPARE FOR COLLEGE. IN THE 2017-2018 SCHOOL YEAR,
	THIS PROGRAM PLACED 3 OHIO COLLEGE GUIDES IN LOCAL HIGH SCHOOLS VIA THE
	AMERICORPS PROGRAM. THESE GUIDES PROVIDED COLLEGE INFORMATION, GAVE
	PRESENTATIONS TO LOCAL STUDENTS, MET WITH STUDENTS & THEIR PARENTS TO
	ASSIST WITH SCHOLARSHIP SEARCHES, COLLEGE APPLICATION & STUDENT AID
	FORM PREP
	260 476
4c	
	GAINING EARLY AWARENESS AND READINESS FOR UNDERGRADUATE PROGRAMS (GEAR
	UP). THIS PROGRAM WORKS WITH STUDENTS FROM THE CROOKSVILLE EXEMPTED
	VILLAGE SCHOOL DISTRICT TO PREPARE THEM FOR LIFE AFTER HIGH SCHOOL.
	STUDENTS PARTICIPATE IN COLLEGE VISITS & CAREER FAIRS AS WELL AS
	EDUCATIONAL ENRICHMENT AND TUTORING ACTIVITIES. STUDENTS ARE MADE
	AWARE OF DIFFERENT CAREER POSSIBILITIES AND THE TRAINING VARIOUS
	CAREERS REQUIRE. COMMUNICATION WITH FAMILIES OCCURS TO MAKE THEM AWARE
	OF OPPORTUNITIES AVAILABLE TO THEIR CHILDREN. FAMILIES ARE ENCOURAGED
	TO BE INVOLVED IN THE LIVES OF THEIR STUDENTS AND UNDERSTANDING AND
	SUPPORTIVE OF THEIR NEEDS.
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses 1,429,700.
	Form <b>990</b> (2018)
832002	2 12-31-18
	2

15070812 755878 503192

Eorm	000	(2018)

1         Is the organization described in section 570(c)(3) or 4947(q)(1) (ther than a private foundation?         1         X           2         Is the organization engage in direct or indirect policitical campaign activities on behalf of or in opposition to candidate for public office? <i>II</i> 'Yes,' complete Schedule <i>C</i> , <i>Part I</i> 3         X           3         Section 50((k)) organizations. Did the organization engage in tobbying activities, or have a section 50((k)) equicitation activities on soften 50((k)) equicitation that receives membership dues, assessments, or atmin arounds as admined in Reveue Procedure 58-192 // 'Yes,' complete Schedule <i>C</i> , <i>Part I</i> 4         X           5         Section 50((k)) organization actions are assemit, including easiemstis to revince donors have the right to provide advice on the distribution or investment of amounts in such finds or accounts? <i>II</i> 'Yes,' complete Schedule <i>D</i> , <i>Part I</i> 6         X           7         Did the organization markina and and the server.         7         X         8           8         Did the organization markina and anotation assement, including easients to softwalke <i>D</i> , <i>Part I</i> 8         X           9         Did the organization markina amount in Part X, in 21. Or escow or cuolodial account liability, sorve as a substrain anotacies?         7         X           10         Did the organization report a mount in Part X, in 21. Or escow or cuolodial account liability for Yes, ' complete Schedule D, Part V         10         X           11         He				Yes	No
2         is the organization engine function (in the complete Schedule 0, Centributors)         2         X           3         Did the organization engine (include) actinging activities on behall 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 lobbing activities, or have a section 501(r) election in effect         4         X           5         Is the organization as defined in Revew DP roceable Biol '9' 'Yes, 'complete Schedule C, Part I         4         X           6         Did the organization in asset on 501(r)(d), 501(r)(d), 501(r) of 501(r)(d) organization that receives membership dues, assessments, or a similar motion investment of B10' '1'Yes, 'complete Schedule C, Part I         5         X           7         Did the organization matinar any done advised funds or any similar hands or account? If 'Yes, 'complete Schedule C, Part I         7         X           8         Did the organization matinar asset in the social resources or other similar assets? If 'Yes, 'complete Schedule C, Part I         8         X           9         Did the organization matinar asset in the social resources or other similar assets? If 'Yes, 'complete Schedule C, Part I         10         X           10         Did the organization method in any other following quastions is 'Yes, 'then complete Schedule C, Part I, I''''''', 'complete Schedule C, Part I, I'''''''''''''', 'complete Schedule C, Part I, I'''''', '''''''''''''''''''	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
<ul> <li>Dit the cognization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public offlex? If Yes, "complete Schedule C, Part II</li> <li>Section 501(b) organizations. Did the organization engage in lobbying activities, or have a section 501(b) election in effect during the tax year? If Yes, "complete Schedule C, Part III</li> <li>Did the organization markina and ord a conservation acsement, including easements to provide advice on the distribution or investment of amount in such funds or account? If Yes, "complete Schedule D, Part II</li> <li>Did the organization regions of the organization insuch funds or account? If Yes, "complete Schedule D, Part II</li> <li>Did the organization markina and easement, including easements to prove the analytic of the organization regions of the organization. The Yes, "complete Schedule D, Part III</li> <li>Did the organization engage in amount in Part X, line 21, for escow or custodial account liability, serve as a subtodiant or analytic through a related organization, noted assets in temporarity restlicted ordowments, permanent endowments? If Yes, "complete Schedule D, Part III</li> <li>Did the organization report an amount for inact, buildings, and oquipment in Part X, line 10? If Yes, "complete Schedule D, Part III</li> <li>Did the organization report an amount for insectiones in program related for a first statil assets reported in Part X, line 10? If Yes, "complete Schedule D, Part III</li> <li>Did the organization report an amount for insectiones is program related (Part V).</li> <li>Did the organization report an amount for insectiones in program related (Part V).</li> <li>Did the organization report an amount for insectiones is program related (Part V).</li> <li>Did the organization report an amount for insectiones is program related (Part V).</li> <li>Did the organization report an amount for insestemets - program related (Part V).</li> <li>Did the orga</li></ul>		If "Yes," complete Schedule A			
public officer if the Yes, "complete Schedule C, Part I         3         X           4 Sectors 051(cg) cognizations. Diff the organization engage in lobbying activities, or have a sectors 051(cg) electron in effect         4         X           5 to the organization a section 051(cg), or 051(cg) or 051(cg	2		2	X	
<ul> <li>Section 50 (Lq3) organizations. Dot the organization engage in lobbying activities, or have a section 50 (Lq) election in effect during the tax year? If "yes," complete Schedule D, Part II         <ul> <li>Is the organization a section 50 (Lq)(Lg), 50 (Lg)(Dg), 65 01 (Lg), 00 ganization that receives membership due, assessments, or similar amounts as defined in Revenue Procedure 98 197 if "Yes," complete Schedule D, Part II             <ul> <li>Did the organization markina any donor advessed funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II</li> <li>Did the organization marking any donor advessed in this or account? If "Yes," complete Schedule D, Part II</li> <li>Did the organization marking and or advessed in this ord or similar funds or account liability, serve as a bactodia for schedule D, Part II</li> <li>Did the organization and the TA X. Ine 21, for escow or custodial account liability, serve as a bactodian for account schedule D, Part IV</li> <li>Did the organization and the TA X. Ine 21, for escow or custodial account liability, serve as a bactodia for account liability, serve as a plactoble.</li> <li>Did the organization and the TA X. Ine 21, for escow or custodial account liability, serve as a bactodian for account and the serve as a plactoble.</li> <li>Did the organization and the result or generaction, hold assets in temporarily registrice endowments, error and a construction graves and explicitable.</li> <li>Did the organization and the result of pravis complete Schedule D, Part V</li> <li>Did the organization neport an amount for investments - organize registrice of dowments, permanet andowments, error and account for line table.</li> <li>Did the organization neport an amount for investments - organize registrice of dowments.</li> <li>Did the organization neport an amount for investments - organize registrice of th</li></ul></li></ul></li></ul>	3				
during the tax year? If Yes," complete Schedule C, Part II         4         X           5         is the organization a sector Solic(i)         501(c)(i)         501(c)(			3		<u> </u>
5         Is the organization ascience 501(6)(4), 501(6)(5), or 501(6)(6) organization that receives membership dues, assessments, or similar amounts as defined in Risenue Procedure 88197 if "Yes," complete Schedule C, Part II         5         X           6         Did the organization marked in Risenue Procedure 88197 if "Yes," complete Schedule C, Part II         6         X           7         Did the organization marked in Risenue Procedure 88197 if "Yes," complete Schedule D, Part II         7         X           8         Did the organization marked in Risenue Procedure 88197 if "Yes," complete Schedule D, Part II         7         X           9         Did the organization marked in Risenue Procedure 8117 if "Yes," complete Schedule D, Part II         7         X           9         Did the organization reports and collections of works of ath, historical treasures, or dether similar assets? If "Yes," complete Schedule D, Part II         8         X           10         Did the organization, flocing a reliable organization, hold assets in temporarily registriction epoteness.         9         X           10         Did the organization report an amount for rest and organization, hold assets in temporarily registriction epoteness.         10         X           11         the organization report an amount for visus temests.         10         X         10         X           12         Did the organization report an amount for visus temests.         10         X	4				
amina amounts as defined in Review Procedure 98-189 // Yes," complete Schedule C, Part II         5         X           6         Did the organization maintain any donor advised funds or any similar funds or accounts? If Yes," complete Schedule D, Part II         6         X           7         Did the organization receive or hold a conservation easament, including assements to preserve open space, the environment, historical treasures, complete Schedule D, Part II         7         X           8         Did the organization maintain collections of work of art, historical treasures, or other similar assets? If Yes," complete Schedule D, Part II         8         X           9         Did the organization maintain collections of work of art, historical treasures, or other similar assets? If Yes," complete Schedule D, Part II         8         X           10         Did the organization, directly or through a related organization, hold assets in temporanly restincted endowments, permanent endowments, or quasi-indownents? If Yes," complete Schedule D, Part V         10         X           11         If the organization on poort an amount for land, buildings, and equipment in Part X, line 197 If Yes," complete Schedule D, Part V         11         X           2         Did the organization report an amount for investments - program related in Part X, line 197 If Yes," complete Schedule D, Part V         11         X           2         Did the organization report an amount for investments - program related in Part X, line 197 If Yes," complete Schedule D, Part V         <			4		<u>X</u>
6         Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment a mounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment a meanent, including assembles to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II         I           8         X         Bid the organization meanent in Deat X, ine 21, for service or custodial account liability, serve as a sustodian for environment, historic land areas, or historic attreasures, or other similar assets? If "Yes," complete Schedule D, Part II         I           9         Did the organization meanent in Part X, ine 21, for service or custodial account liability, serve as a sustodian for endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V         I         I           9         Did the organization report an amount for land, buildings, and equipment in Part X, line 10 Part X, li	5				
provide advice on the distribution or investment of amounts in such funds or account? 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, the environment, historic inductures? If "Yes," complete Schedule D, Part II       7       X         8       Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II       8       X         9       Did the organization report an amount in Part X, line 21, for escrow or cutodial account liability, serve as a subtodian for amounts no listel in Part X, ico provide credit counseling, debt management, credit repair, or debt nepatiation services? If "Yes," complete Schedule D, Part IV       8       X         10       Did the organization report an amount for land, buildings, and equipment in Part X line.di?? If "Yes," complete Schedule D, Part VI.       10       X         11       If the organization report an amount for investments - other securities in Part X, line 13? If "Yes," complete Schedule D, Part XI.       11a       X         12       Did the organization report an amount for investments - other management for the tax sets in Part X, line 13? If "Yes," complete Schedule D, Part XI.       11a       X         13       Did the organization report an amount for investments - organ material or the tax sets in Part X, line 13? If "Yes," complete Schedule D, Part XI.       11a       X         14       Did the organization re			5		<u> </u>
7       Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If ''res,'' complete Schedule D, Part II.       7       X         8       Did the organization maintain collections of works of art, historical treasures, or voltes collal account liability, serve as a sustodian for amounts not listed in Part X, ine 21, for escrow or custodial account liability, serve as a sustodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?       9       X         10       Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a sustodian for amounts not listed in Part X, line 21, for escrow or custodial account liability, serve as a sustodian for amounts not listed in Part X, line 21, for escrow or custodial account liability, serve as a sustodian for amounts on any of the following questions is "Yes," thomographic Schedule D, Part V       10       X         10       If the organization report an amount for investments - other securities in Part X, line 13 th is 5% or more of its total assets reported in Part X, line 167 // Yes, "complete Schedule D, Part VII.       11a       X         11       Did the organization report an amount for investments - program flexibility for uncertain tory diverse for the tax year?       11a       X         11       Did the organization sportes Schedule D, Part VII.       11a       X         11       Did the organization report an amount for investinments for the tax year? If 'Yes, "complete Schedule D	6				
the environment, historical darges, or historic structures? If "Yes," complete Schedule D, Part II       7       X         8       Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III       8       X         9       Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a buildoin for amounts not listed In Part X, or provide credit counseling, debt management, or debt negotiation services?       9       X         10       Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V       10       X         11       If the organization report an amount for indu, buildings, and equipment in Part X, line 13? If 'Yes,' complete Schedule D, Part VI       10       X         12       Did the organization report an amount for investments - other securities in Part X, line 13? If 'Yes,' complete Schedule D, Part VI       11a       X         13       X       Did the organization report an amount for investments - other assets in Part X, line 13? If 'Yes,' complete Schedule D, Part VI       11a       X         14       X       Did the organization report an amount for investments or the tax year include a footnote that addresset reported in Part X, line 16? If 'Yes,' complete Schedule D, Part X       11d       X         15       Did the organization report an amount for other ass			6	<u> </u>	
B       Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III       III         B       Did the organization report an amount in Part X, line 21, for escrew or custodial account liability, serve as a bustodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?       9         IV the organization is ported a manount in Part X, line 21, for escrew or custodial account liability, serve as a bustodian for amounts not listed D. Part IV       9         ID the organization is answer to any of the following questions is 'Yes,' then complete Schedule D, Parts V, VII, VII, VI, or X as applicable.       9         B       Did the organization report an amount for land, buildings, and equipment in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16 'I 'Yes,' complete Schedule D, Part VI       11a         Z       Did the organization report an amount for investments - program relief in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16 'I 'Yes,' complete Schedule D, Part XI       11d       X         Did the organization report an amount for other assets in Part X, line 5 that is 5% or more of its total assets reported in Part X, line 16 'I 'Yes,' complete Schedule D, Part XI       11d       X         Did the organization sparate or consolidated financial statements for the tax year' 'I 'Yes,' complete Schedule D, Part XI       11d       X         12a       Did the organization seporate, Schedule D, Part XI       11	7				37
Schedule D, Part III       8       X         9       Did the organization report an amount in Part X, line 21, ne 21, ne scrow or custodial account liability, serve as a custodian service?       8       X         9       Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V       9       X         11       If the organization report an amount for land, buildings, and equipment in Part X, line 10' If 'Yes,' complete Schedule D, Part V       10       X         a Did the organization report an amount for investments - other securities in Part X, line 10' If 'Yes,' complete Schedule D, Part VI       11       X         b Did the organization report an amount for investments - other securities in Part X, line 12' If 'Yes,' complete Schedule D, Part VI       11       X         c Did the organization report an amount for investments - other securities in Part X, line 13' If 'Yes,' complete Schedule D, Part VII       11       X         c Did the organization report an amount for investments - other asset in Part X, line 13' If 'Yes,' complete Schedule D, Part XIII       11       X         c Did the organization schedule D, Part IX       116       X       116       X         110       X       116       X       116       X         1111       X       116       X       116       X	-		7		
9       Did the organization report an amount in Part X, line 21, for escrew or custodial account liability, serve as a sustodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or doth responsibility esticicate endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V       9       X         10       Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments? If "Yes," complete Schedule D, Part V       10       X         11       If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V       11a       X         12       Did the organization report an amount for investments - other securities in Part X, line 13? If "Yes," complete Schedule D, Part V       11a       X         13       Did the organization report an amount for investments - other securities in Part X, line 13? If "Yes," complete Schedule D, Part V       11a       X         14       X       11b       X       11b       X         14       X       11a       X       11a       X         15       Did the organization report an amount for threast program related In Part X, line 15? If "Yes," complete Schedule D, Part X       11a       X         16       Did the organization report an amount for other assets in Part X, line 16? If "Yes," complete Schedule D, Part X       11a       X         1	8				v
amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?     y     X       bit the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V     10     X       11     If the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V     10     X       11     If the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part V     11a     X       11     Did the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII     11c     X       11     Did the organization report an amount for investments - other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XI     11d     X       12     Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X     11t     X       13     It to reganization included in consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X     11t     X       14     Did the organization aspective IV to line 128, there completing Schedule D, Part X     11t     X       14     Did the	-		8		
If "Yes," complete Schedule D, Part IV       9       X         10       Did the organization, directly or through a reliated organization, hold assets in temporarily restrictly endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V       10       X         11       If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI       11a       X         b       Dot the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI       11a       X         c       Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI       11d       X         d       Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11d       X         d       Did the organization report an amount for other labulities in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         2       Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         2       Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11td       <	9				
10       Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments //r 'Yes,' complete Schedule D, Part V       10       X         11       If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Part V       10       X         a       Did the organization report an amount for land, buildings, and equipment in Part X, line 10? // 'Yes,' complete Schedule D, Part VI       11a       X         b       Did the organization report an amount for investments - other securities in Part X, line 12? that is 5% or more of its total assets reported in Part X, line 16? // 'Yes,' complete Schedule D, Part VI       11b       X         c       Did the organization report an amount for investments - program related in Part X, line 16? // 'Yes,' complete Schedule D, Part VI       11c       X         c       Did the organization report an amount for other assets in Part X, line 16? // 'Yes,' complete Schedule D, Part XI       11d       X         c       Did the organization report an amount for other assets in Part X, line 16? // 'Yes,' complete Schedule D, Part XI       11d       X         12       Did the organization report an amount for other assets in Part X, line 16? // 'Yes,' complete Schedule D, Part X       11d       X         13       Is the organization report an amount for other assets in Part X, line 16? // 'Yes,' complete Schedule D, Part X       11d       X         14					v
endowments, or quasi-endowments? // *Yes," complete Schedule D, Part V       10       X         11       If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, VII, X, or X       as applicable.         a) Did the organization report an amount for land, buildings, and equipment in Part X. Ine 10? // *Yes," complete Schedule D, Part VI       11a       X         b) Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? // *Yes," complete Schedule D, Part VI       11b       X         c) Did the organization report an amount for threstments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? // *Yes," complete Schedule D, Part VII       11d       X         d) Did the organization report an amount for other assets in Part X, line 16 that is 5% or more of its total assets reported in Part X, line 16? // *Yes," complete Schedule D, Part X       11d       X         e) Did the organization report an amount for other labilities in Part X, line 16? // *Yes," complete Schedule D, Part X       11d       X         e) Did the organization site port an amount for other labilities in Part X, line 16? // *Yes," complete Schedule D, Part X       11d       X         e) Did the organization stepport an amount for other labilities in Part X, line 16? // *Yes," complete Schedule D, Part X       11d       X         12a       Did the organization stappartse, under PIN 4 (ASC TAYO) // *Yes, "	40		9		
11       If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, VI, VII, VI, VII, VI, VI	10		10	v	
as applicable.       a) Did the organization report an amount for land, buildings, and equipment in Part X, line 107; // "Yes," complete Schedule D, Part VI       11a       X         b) Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? // "Yes," complete Schedule D, Part VII       11a       X         c) Did the organization report an amount for investments - orgoram related th Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? // "Yes," complete Schedule D, Part VII       11c       X         d) Did the organization report an amount for other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? // "Yes," complete Schedule D, Part X       11d       X         e) Did the organization report an amount for other liabilities in Part X, line 25? // "Yes," complete Schedule D, Part X       11e       X         f) Did the organization report an amount for other liabilities in Part X, line 25? // "Yes," complete Schedule D, Part X       11e       X         12a       Did the organization is bability for uncertain tax positioffs under FIN 48 (ASC 740? // "Yes," complete Schedule D, Part X       11e       X         12a       Did the organization included in consolidated, independent audited financial statements for the tax year?       11f       X         12a       X       11d       X       12a       X         13a       Is the organization aschool described in	44		10	<u></u>	
a Did the organization report an amount for land, buildings, and equipment in Part X, line 19? // "Yes," complete Schedule D, Part VI       11a       X         b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? // "Yes," complete Schedule D, Part VI       11b       X         c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? // "Yes," complete Schedule D, Part VII       11c       X         d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? // "Yes," complete Schedule D, Part XI       11c       X         e Did the organization report an amount for other assets in Part X, line 25? // "Yes," complete Schedule D, Part X       11d       X         f Did the organization is bability for uncertain tax positions under IN48 (ASC 740?) // "Yes," complete Schedule D, Part X       11t       X         12a       Did the organization obtain separate, independent audited financial statements for the tax year?       11t       X         13       Is the organization notulated in section 170(b)(1/A(N))?       11* Yes," complete Schedule E       11a       X         14a       Did the organization aschool described in section 170(b)(1/A(N)?       11* Yes," complete Schedule E       11a       X         15       Did the organization navice asprease or mores	11				
Part VI       11a       X         b       Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.       11b       X         c       Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.       11c       X         d       Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11c       X         e       Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11e       X         f       Did the organization's separate or consolidated financial statements for the tax year: locute a tootnote that addresses the organization olded of in consolidated, independent audited financial statements for the tax year?       11f       X         12a       Did the organization aschool described in section 170(D)(1)(A)(II)?       If "Yes," complete Schedule E       12a       X         13       Is the organization report on Part IX, column (A), line 3, 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       16       X         15       Did the organization report on Part IX, column (A),	~				
b       Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11b       X         c       Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D Part VIII       11c       X         d       Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11c       X         f       Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11e       X         f       Did the organization is parate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X       11e       X         111       X       11e       X       11e       X         112       X       11d       X       11e       X         113       Ithe organization obtain separate, independent audited financial statements for the tax year?       11f       X         113       Ithe organization as tobal described in section 170(b)(1)(A)(ii)?       If "Yes," complete Schedule D, Part X and XI       12a       X         114       Did the organization mave agaregate revenues or expenses of more than \$10,000 form grantmakin	a		110	x	
assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11b       X         c Did the organization report an amount for investments - program related In Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11c       X         d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11c       X         e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11t       X         112       Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization separate, independent audited financial statements for the tax year?       11t       X         12a       Did the organization separate, independent audited financial statements for the tax year?       11t       X         13       Is the organization ashowerd       No* to line 12a, then completing Schedule D, Part X and XII is optional       12a       X         14a       Did the organization maint an office, employees, or agents outside of the United States?       14a       X         15       Did the organization associal explories of more than \$5,000 of gargeate grants or other assistance to or for any foreign organization? How tax, Since 0 and 10.       14b       X         16       X       11d <t< td=""><td>h</td><td></td><td>11a</td><td></td><td></td></t<>	h		11a		
c       Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII       11c       X         d       Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11d       X         e       Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         f       Did the organization othat separate or consolidated financial statements for the tax year include a tootnote that addresses the organization othatin separate, independent audited financial statements for the tax year?       11f       X         12a       Did the organization included in consolidated, independent audited financial statements for the tax year?       11f       X         13       Is the organization anintain an office, employees, or agents outside of the United States?       13a       X         14a       Did the organization naintain an office, employees, or agents outside of the United States?       14a       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV       15       X         16       X       17       X       16d       X       17 <td< td=""><td>D.</td><td></td><td>11h</td><td></td><td>x</td></td<>	D.		11h		x
assets reported in Part X, line 16? // f*Yes,* complete Schedule D/ Part VIII       11c       X         d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? // f*Yes,* complete Schedule D, Part X       11d       X         e Did the organization report an amount for other liabilities in Part X, line 25? // f*Yes,* complete Schedule D, Part X       11d       X         f Did the organization report an amount for other liabilities in Part X, line 25? // f*Yes,* complete Schedule D, Part X       11d       X         12a       Did the organization obtain separate or consolidated financial statements for the tax year? complete Schedule D, Part X       11f       X         12a       Did the organization obtain separate, independent audited financial statements for the tax year?       11f       X         b Vas the organization included in consolidated, independent audited financial statements for the tax year?       12b       X         14a       Did the organization assivered 'No* to line 12a, then completing Schedule D, Parts XI and XII is optional       12b       X         14a       Did the organization assivered wo* to line 12a, then completing Schedule E       13       X         14a       Did the organization associal schedule F, Parts I and IV       14a       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of ggregate grants or other assistance to or for relign indi	c		115		
d Did the organization report an amount for other assets in Parl X, line 15 that is 5% or more of its total assets reported in Parl X, line 16? If "Yes," complete Schedule D, Part IX.       11d       X         e Did the organization report an amount for other liabilities in Parl X, line 25? If "Yes," complete Schedule D, Part X       11e       X         f Did the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       11e       X         12a       Did the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       11f       X         12a       Did the organization obtain separate, independent audited financial statements for the tax year?       If "Yes," complete Schedule D, Part X and XII       12a       X         b Was the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       13       X         14a       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       16       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garsts or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of garsts or other assistance to or for any foreign organization report more than \$15,000 ot expenses for professional fundraising services o	Ŭ		11c		х
Part X, line 16? If "Yes," complete Schedule D, Part IX       11d       X         e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11e       X         f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year?       11f       X         12a       Did the organization included in consolidated, independent audited financial statements for the tax year?       11f       X         b Was the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII       12b       X         b Was the organization maintain an office, employees, or agents outside of the United States?       14a       X         14a       Did the organization neover a systemation report on Part IX, column (A), line 3, more than \$5,000 of garts or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for for forign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         17       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 G, Part II       16       X         18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part IX, column (A), line 3, more than \$5,000 of aggregate grant	d				
e       Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11e       X         f       Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization is liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       11e       X         12a       Did the organization biain separate, independent audited financial statements for the tax year?       If "Xs," complete Schedule D, Part X and XII       11e       X         12a       Was the organization included in consolidated, independent audited financial statements for the tax year?       If "X       12a       X         13       Is the organization maintain an office, employees, or agents outside of the United States?       14a       X         14a       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garnts or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for for for gin individuals? If "Yes," complete Schedule G, Part I       16       X         17       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for for gin individuals? If "Yes," complete Schedule G, Part I       16       X         18       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for for gin individuals? If "Y			11d		х
f       Did the organization's isability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       11f       X         12a       Did the organization separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part XI and XII       12a       X       12a	е			Х	
the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       11f       X         12a       Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete       12a       X         12b       Was the organization included in consolidated, independent audited financial statements for the tax year?       12a       X         13       Is the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization nave 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 II and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign inginization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign inginization report more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign inginization report more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or	-				
12a       Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete       12a       X         b       Was the organization included in consolidated, independent audited financial statements for the tax year?       12b       X         b       Was the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b       X         14a       Did the organization anishting an office, employees, or agents outside of the United States?       14a       X         b       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14a       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 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 II and IV       16       X         16       Did the organization report on 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 II       17       X         18       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       18       X </td <td></td> <td></td> <td>11f</td> <td>x</td> <td></td>			11f	x	
Schedule D, Parts XI and XII       12a       X         b       Was the organization included in consolidated, independent audited financial statements for the tax year?       12b       X         13       Is the organization a school described in section 170(b)(1)(A)(ii)?       If "Yes," complete Schedule E       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization report on Part IX, column (A), line 3, 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 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       16       X         17       Did the organization report more than \$15,000 of grass income from gaming activities on Part VIII, lines 9a? If "Yes,"       18       X         19       Did the organization report more than \$15,000 of grass income from gaming activities on Part VIII, lines 9a? If "Yes,"       18       X         19       Did the organization report more than \$15,000 of grass income from gaming activities on Part VIII, lines 9a? If "Yes,"       2	12a				
b       Was the organization included in consolidated, independent audited financial statements for the tax year?       12       X         13       Is the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       13       X         14       Did the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States?       14a       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 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 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 G, Part I       16       X         17       Did the organization report on than \$15,000 tof appreses for professional fundraising services on Part VX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part II       18       X         19       Did the organization operate one o			12a	x	
13       Is the organization a school described in section 170(b)(1)(A)(ii)?       If "Yes," complete Schedule E       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? 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 gargegate grants or other assistance to or for foreign individuals? 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 II and IV       16       X         17       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 G, Part II and IV       16       X         18       Did the organization report 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 II       17       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 9a? If "Yes," comple	b				
13       Is the organization a school described in section 170(b)(1)(A)(ii)?       If "Yes," complete Schedule E       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? 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 gargegate grants or other assistance to or for foreign individuals? 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 II and IV       16       X         17       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 G, Part II and IV       16       X         18       Did the organization report 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 II       17       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 9a? If "Yes," comple		If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D. Parts XI and XII is optional	12b		х
<ul> <li>14a Did the organization maintain an office, employees, or agents outside of the United States?</li> <li>14a X</li> <li>b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV</li> <li>14b X</li> <li>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 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 II and IV</li> <li>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 II and IV</li> <li>16 X</li> <li>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</li> <li>18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 9a? If "Yes," and IX</li> <li>19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H</li> <li>20a X</li> <li>20b</li> <li>21 X</li> </ul>	13		13		Х
investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000       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 II 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       17       X         18       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II       18       X         19       Did the organization operate one or more thospital facilities? If "Yes," complete Schedule H       20a       X         20a       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 H       20a       X	14a		14a		Х
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       17       X         18       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       18       X         19       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         20a       X       20b       20a       X         20a       X       20b       20a       X         20b       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 H       20a       X         20b       If "Yes," to line 20a, did the organization attach a copy of its audited financial statements to this return?       21       X     <	b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
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       17       X         18       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       18       X         19       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         20a       X       20b       20a       X         20a       X       20b       20a       X         20b       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 H       20a       X         20b       If "Yes," to line 20a, did the organization attach a copy of its audited financial statements to this return?       21       X     <		investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
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       17       X         18       Did the organization report more than \$15,000 of grass income and contributions on Part VIII, lines 1 c and 8a? If "Yes," complete Schedule G, Part II       17       X         19       Did the organization operate one or more than \$15,000 of grass income from gaming activities on Part VIII, line 9a? If "Yes,"       18       X         20a       X       20a       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         20a       Did the organization report more than \$5,000 of grasts 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       20a       X			14b		Х
<ul> <li>16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i></li> <li>17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I</i></li> <li>18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i></li> <li>19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i></li> <li>20a Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i></li> <li>20a If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?</li> <li>20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i></li> </ul>	15				
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       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,"       18       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       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       X			15		X
<ul> <li>17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i></li> <li>18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i></li> <li>19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i></li> <li>20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i></li> <li>b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?</li> <li>20b</li> <li>21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i></li> </ul>	16				
column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I       17       X         18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines       18       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       18       X         19       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       19       X         20a       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       20a       X			16		<u> </u>
18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines       18       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"       18       X         19       Did the organization operate one or more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"       19       X         20a       Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> 20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       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? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i> 21       X	17				
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,"       19       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       19       X         20a       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       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       X			17		X
19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       19       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         20a       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization operate on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II       21       X	18				
complete Schedule G, Part III       19       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       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       X			18	X	
20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       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       X	19				77
b       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       X					
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       X					X
domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II			20b		
	21			v	
					0010

832003 12-31-18

Form 990 (2	2018)	MUSKINGUM	COUNTY	COMMUNITY	FOUNDATION
Part IV	Checklist of R	equired Schedu	lles <sub>(continue</sub>	ed)	

22       Dot the organization report more than 55,000 of grants or other assistance to or for domestic individuals on Part IX. Control (A), ine 27 (***********************************				Yes	No
23       Del the organization answer "Ver" to Part VII, Section A, Ime 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes, " complete Schedule V, If "No," to b Ime 258       24a       DE the organization have a tax exempt bond issue with an outstanding principal annount of more than \$100,000 as of the stat day of the year, that was stated and the Versen's Verse's " camplete Schedule V, If "No," to b Ime 258       24a       X         24a       DE the organization metra tan encorm account of the than a returning second at any time during the year' to defease any tax-exempt bond?       24a       X         25       Section 501(c)(5), 501(c)(4), and 501(c)(29) organizations. Dit the cognization and the transpart protein cognization and the reagaged 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 and boting?       25b       X         25       Section 501(c)(5), 501(c)(4), 401(c)(4), 403(c)(4), 403(c)(4), 403(c),	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
and former officers, directors, trustees, key employees, and highest compensated employees?     # "Yes," complete       24a     Did the organization have a tax-exampt bonds beyond a temporary period exception?     24b       24b     Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?     24b       24b     Did the organization market any encode size with an outstanding encount of more than \$100,000 as of the assert at a source that than a refuted exception?     24b       24b     Did the organization market any encode size exempt bonds beyond a temporary period exception?     24c       25a     Section \$010(x)8, 501(x)4, and \$010(x)200 argenizations. Dut the organization engage in a excess benefit transaction with a disqualified period of the year?     24c       25a     Section \$010(x)8, 501(x)4, and \$010(x)200 argenizations. Dut the organization engage in an excess benefit transaction with a disqualified period or in a proxy exit and that the transaction have that engaged in an excess benefit transaction with a disqualified period or in a proxy exit and that the transaction have that engaged in an excess benefit transaction with a disqualified period or in a proxy exit and that the transaction have that engaged in an excess benefit transaction engage there are provide a grant or there assistance to an officer, director, trustee, key employee, substantial contributor or employee there are a summary of the assistance to an officer, director, trustee, key employee, substantial contributor or employee there are acceptions?     7       7     Did the organization neove that a size and the organization engage to a subses transacore with a controllation or employee there are acceptions		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
Schedule /     23     X       24a Did the organization have a taxe exempt bond issue with an outstanding principal amount of more than \$100,000 as of the standard day of the ystar, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K, If 'Wo,'' go to line 25a.     24a       24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?     24a       24c Did the organization maintain an escrew account other than a refurding escrew at any time during the year to detease any tax-exempt bonds?     24d       25a Section 50(163), 501(464), and 501(c)(29) organizations. Did the organization ange in an excess benefit transaction with a disqualified perion during the year?     24d       25a Section 50(163), 501(464), and 501(c)(29) organizations. Did the organization ange in an excess benefit transaction has not been reported on any of the organization appeir that the transaction has not been reported on any of the organization appeir and with a disqualified perion during the year?     25a       25 Did the organization report any amount on Part X, line 5, 0, 22 for recorvables from or payabses to adigualified perions. If Yes,' complete Schedule L, Part I     25a       27 Did the organization part of the assistance to an officer, director, truutee, key employees. If Yes,' complete Schedule L, Part IV     25a       28 Aurent or former officer, director, truutee, key employees. They are compare Schedule L, Part IV     25a       29 A tarrity of which a current or former officer, director, truutee, key employees. If Yes,' complete Schedule L, Part IV     25a       29 A tarrity of which a current or former o	23				
24a Ddt the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issue dater December \$1, 2002? // 'Yes, 'answer lines 24b through 24d and complete Schedule K. // Wa, 'go to line 25a       24a       X         b Dd the organization mixed any proceeds of tax-exempt bonds beyond a temporary period exception?       24a       X         c Dd the organization mixed any proceeds of tax-exempt bonds beyond a temporary period exception?       24a       X         25a Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person tar in ghury any? // 'Yes, 'complete Schedule L, Part /       25a       X         25a Dection 501(c)(3), 501(c)(4), and 501(c)(20) organizations pior Forms 900 or 900 E27. // 'Yes, 'complete Schedule L, Part /       25a       X         25a Dection 501(c)(3), 501(c)(4), and 501(c)(20) organizations pior Forms 900 or 900 E27. // 'Yes, 'complete Schedule L, Part /       25a       X         25a Dection 501(c)(3), and the schedule L, Part // 'Section committee member, or to 3 25% contribuid entity or family member of a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to 3 25% contribuid entity or family member of a grant for them assistance to an officer, director, trustee, or director indirect orier(?) if 'Yes, 'complete Schedule L, Part I // 'Section for applicable finger thereofy was an officer, director, trustee, or director indirect orier(?) if 'Yes, 'complete Schedule L, Part I // 'Section forme officer, director, trustee, or div		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
is at day of the year, that was issued after December 31. 2002? If "Yes," answer lines 24b through 24d and complete     24a     X       b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?     24b     24b       c Did the organization maintain an encrow account other than a refunding encrow at any time during the year to defease any tax-seempt bonds?     24d       d Did the organization and at as an "on behalf of" issuer for bonds outstanding at any time during the year?     24d       25a Section 50(16)(3), 501(40), 400 400 400 400 50(12/30 organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year?     24d       25a Section 50(16)(3), 501(40), 400 400 400 50(12/30 organizations. Did the organization engage in an excess benefit transaction has not been reported on any of the organization provements and that the transaction has not been reported on any of the organization and public scess benefit transaction with a disqualified personn?     25b     X       27 Did the organization apport athy, time 6, 6, or 22 for receivables from or payables to bing dimith or former officers, directors, trustees, key employees, roles and the organization apport athy and the transaction the organization committee members, or a dispute the organization apport athy as a structure or former officer, director, trustee, new proloyee? If 'Yes,' complete Schedule L, Part IV     26b     X       27 Did the organization captor to former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV     26b     X       28 was the organization receive apprelet Schedule L, Part IV     26b     X </td <td></td> <td></td> <td>23</td> <td></td> <td>X</td>			23		X
Schedule K. H' Wo, 'go to fine 25a       24a       X         Did the organization investma proceeds of tax exempt bonds beyond a temporary period exception?       24a       X         C Did the organization maintain an escrow account other than a refunding escrow at any time during the year?       24d       X         Za Section 501(c)(3), 301(c)(4), and 501(c)(29) organizations. Did the organization excess benefit transaction with a disqualified person during the year?       24d       Za         Za Section 501(c)(3), 301(c)(4), and 501(c)(29) organizations. Did the organization excess benefit transaction with a disqualified person in a prior year, and that the transaction may of the organization is prior Forms 900 or 900527 H' we, complete Schedule L, Part I       25a       X         Zb Did the organization excess them that association is prior Forms 900 or 900527 H' we, complete Schedule L, Part I       25b       X         Zi Did the organization report any amount on Part X, Ime 5, 6, or 22 for receivables from or payables (b, any durinft or former officer, director, trustee, key employees, or disputited paratens? H' Yes, 'complete Schedule L, Part I       26       X         Zi Was the organization report ag and the administration on on addition and exceptions;       a A current or former officer, director, trustee, or key employees (r) H''ss, 'complete Schedule L, Part I V instructions for applicable filter torms officer, director, trustee, or key employees (r) H''ss, 'complete Schedule L, Part I V       28a       X         24 A current or former officer, director, trustee, or key employees (r) H''ss, 'complete Schedule L, Pa	24a				
b Ddt the organization invest any proceeds of tar-exempt bonds beyond a temporary period exception?       24b         c Ddt the organization maintain an escrow account other than a refunding escrow at any time during the year 0 defease any tax-exempt bonds?       24c         d Dd the organization act as an 'on behalf of issuer for bonds outstanding at any time during the year?       24d         25a Section 501(2(3), 501(2(4), and 501(2(2)) grapmizations. During the year?       14d         b Is the organization avait that the nagaed in an excess benefit transaction with a disqualified person during the year?       15d         25b Dd the organization avait that the nagaed in an excess benefit transaction with a disqualified person in a prior year, and that the transaction report any amount on Part X, line 5, 6, or 22 for neceivables from or payables to any durinft or former officer, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II       26b       X         27 Dd the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor of any or these persons? If 'Yes,' complete Schedule L, Part IV       28b       X         28 Was the organization apert that the market, or the size or key employee? If 'Yes,' complete Schedule L, Part IV       28b       X         29 bd the organization receive on thome of the organization receive more than 255 odd in one ageh. Offithuston's II'Yes,' complete Schedule L, Part IV       28b       X         29 bd the organization convititises or at a hisfibicial freasers, or deris		last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
c       Did the organization maintain an encow account other than a refunding escrow at any time during the year to defease any tax exempt bonds?       24d         d       Did the organization acts as in the behalf of "issue for bonds outstanding at any time during the year?       24d         25a       Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person on in a pior year, and that the thransaction has not been reported on any of the organization a pior year, and that the thransaction has not been reported on any of the organization approx thus to be integrated on a provide a grant or other assistance to an officer, director, functions, functins, functions, functions, fu			24a		X
any taxeempt bonds?       24c         d Did the organization act as an 'on behalf of' issue for bonds outstanding at any time during the year?       24d         d Did the organization act as an 'on behalf of' issue for bonds outstanding at any time during the year?       24d         d Did the organization aver that it engaged in an excess benefit transaction with a disqualified person up in provide.       25a       X         b Is the organization avere that it engaged in an excess bondit that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27. If 'Yes,' complete Schedule L, Part I       25a       X         20 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any durinit or former officer, directors, trustes, key employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II       26b       X         27 Did the organization aparty to a business transaction with a discussified persons? If 'Yes,' complete Schedule L, Part II       27       X         28 Was the organization report apart former officer, director, trustee, or Key employees, or disqualified persons? If 'Yes,' complete Schedule L, Part IV       28a       X         29 Did the organization report apart of former officer, director, trustee, or Key employee?       1/Yes,' complete Schedule L, Part IV       28a       X         20 Did the organization receive contributions of at nistricial troburse, or disc director, trustee, or Key employee?       1/Yes,' complete Schedule L, Part IV       28a       X <td< td=""><td></td><td></td><td>24b</td><td></td><td></td></td<>			24b		
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?       24         256 Section 501(c)(s), 501(c)(s), 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         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 spior Forms 900 or 994-27? If 'Yes, 'complete Schedule L, Part I       25a         250 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables tay durinft or former officers, directors, trustees, key employees, or disgualified persons? If 'Yes, 'complete Schedule L, Part II       25b       X         27       Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thered, a grant selection committee member, or to a 5% contributed entity or family member of any orthese persons? If 'Yes, 'complete Schedule L, Part IV       28a       X         28       Was the organization receive conflore, director, trustee, or Key employee? If 'Yes, 'complete Schedule L, Part IV       28b       X         29       Did the organization receive conflore, director, trustee, or Key employee? If 'Yes, 'complete Schedule L, Part IV       28a       X         29       Did the organization receive contributions of Ar bipologie? If 'Yes, 'complete Schedule L, Part IV       28a       X         30 </td <td>С</td> <td></td> <td></td> <td></td> <td></td>	С				
256       Section 501(c)(3), 501(c)(29) or ganizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? if "Yes," complete Schedule L, Part I       25a       X         251       Section 501(c)(3), 501(c)(24) and 501(c)(29) or ganization spice Forms 590 or 990-E27 if "Yes," complete Schedule L, Part I       25a       X         251       Did the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any ourment or forms officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II       26a       X         270       Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereor, a grant selection committee member, or to a 355 controlled entity or family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         284       X       C An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         29       Did the organization and exceptions of the following parties (see Schedule L, Part IV       28a       X         29       Did the organization receive contributions of art, histheral treasures, or kite projets Schedule L, Part IV       28a       X         29 <t< td=""><td></td><td></td><td></td><td></td><td></td></t<>					
transaction with a disqualified person during the yea? If "Yes," complete Schedule L, Part I       25a       X         b is the organization name 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 Form S90 or 900-E27 If "Yes," complete Schedule L, Part I       25b       X         26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, highest compensated employees, or disqualined persons? If "Yes," complete Schedule L, Part I       26a       X         27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant salection committee member, or to a 35% confibuled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II       27a       X         28 Was the organization party to a business transaction with one of the following parties (see Schedule L, Part IV       28a       X         29 Did the organization receive more officer, director, trustee, or fixey employee? If "Yes," complete Schedule L, Part IV       28a       X         29 Did the organization receive on thormer officer, director, trustee, or direct or indirect ommer? If "Yes," complete Schedule L, Part IV       28a       X         29 Did the organization receive on thormer officer, director, trustee, or Key employee? If "Yes," complete Schedule L, Part IV       28a       X         29 Did the organization receive on thormere officer, director, trustee, or fixer on indirector o			24d		<u> </u>
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 spice Forms 990 or 990-E27 // "Yes," complete Schedule L, Part I       256         260       Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any orthered to former officer, director, trustes, key employees, highest compensated employees, or dispusitive directors? // "Yes," complete Schedule L, Part I       266       X         270       Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or tamily member of a any of these persons? // "Yes," complete Schedule L, Part II       261       X         281       Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV       271       X         283       A current or former officer, director, trustee, or Key employee? // "Yes," complete Schedule L, Part IV       282       X         290       Did the organization neceive contributions of art, histonical treasures, or other similar assets, or qualified onservation contributions? // "Yes," complete Schedule M       282       X         301       Did the organization neceive and the stander the standers, or the grant assets, or qualified conservation contributions? // "Yes," complete Schedule M       282       X         310       Did the organization neceive and party disregarded	25 a				
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       25       X         26       Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any durents or former officers, directors, trustees, key employees, highest compensated employees, or disgualified persons? If "Yes," complete Schedule L, Part II       26       X         27       Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any durents or former officers, director, trustee, or key employees, or disgualified persons? If "Yes," complete Schedule L, Part II       26       X         28       Did the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV       28a       X         29       Did the organization receive contributors of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         29       Did the organization receive contributions of art, histofical reasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule L, Part IV       28a       X         30       Did the organization receive contributions of art, histofical reasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       29       X         30       Did the organization inducts, terminate, or dissofie and cease operations?       If "Yes," complete Schedule A, Part I       30       <			25a		<u> </u>
Schedule L, Part I       25b       X         26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any durrent or forme offices, directors, trustees, key employees, or disgualified persons? If "Yes," complete Schedule L, Part II       26       X         27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, substantial contributor or employee thereof, a grant selection committee member, or to a 35% contributed entity or family member of any of these persons? If "Yes," complete Schedule L, Part II       27       X         28 Was the organization a part to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions);       a A current or former officer, director, trustee, or key employee (I "Yes," complete Schedule L, Part IV       28b       X         29 Did the organization receive more than \$25,000 in non cash contributions? If "Yes," complete Schedule L, Part IV       28b       X         29 Did the organization receive more than \$25,000 in non cash contributions? If "Yes," complete Schedule M       20       X         30 Did the organization receive more than \$25,000 in non cash controllowing Parties Schedule M       20       X         31 Did the organization receive more than \$25,000 in non cash controllowing Part II.       30       X         32 Did the organization receive more than \$25,000 in non cash controllowing Part II.       30       X         32 Did the organization receive mo	b				
26       Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any durrent or tormer officers, directors, trustees, key employees, nighest compensated employees, or disgualified persons? // 'Yes," complete Schedule L, Part II       26       X         27       Did the organization provide a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? // 'Yes," complete Schedule L, Part II       27       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV       28a       X         29       A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV       28a       X         29       A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV       28a       X         29       Did the organization receive contributions of at, historical treasures, or currer similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule L, Part IV       28a       X         29       Did the organization receive contributions of at, historical treasures, or currer similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule L, Part IV       28a       X         20       Did the organization receive contributions of at, historical treasures, or currer similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M       30       X         31 <td></td> <td></td> <td></td> <td></td> <td></td>					
former officers, directors, trustees, key employees, highest compensated employees, or disgualified persons? If 'Yes,"       26       X         27       Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes, 'complete Schedule L, Part III       27       X         28       Was the organization provide a grant or other assistance to an officer, director, trustee, or key employee? If 'Yes, 'complete Schedule L, Part IV       28a       X         29       A current or former officer, director, trustee, or key employee? If 'Yes, 'complete Schedule L, Part IV       28b       X         29       Did the organization receive more than \$25,000 in non cash contributions? If 'Yes, 'complete Schedule M.       29       X         30       Did the organization receive more than \$25,000 in non cash contributions? If 'Yes, 'complete Schedule N.       29       X         31       Did the organization receive more than \$25,000 in non cash contributions? If 'Yes, 'complete Schedule N.       30       X         32       Did the organization receive anore than \$25,000 in non cash contributions? If 'Yes, 'complete Schedule N.       30       X         31       Did the organization receive any target schedule M.       30       X       31       X         32       Did the organization sell, exchange, dispose of, of tr			25b		
complete Schedule L, Part II       26       X         27       Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereor, a grant or other assistance to an officer, director, trustee, or to a 35% contribued entity or family member of any of these persons? If "Yes," complete Schedule L, Part III       27       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions);       28       X       28       X         29       A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28       28       X         29       Did the organization receive more than \$25,000 in nor cash contributions? If "Yes," complete Schedule L, Part IV       28       29       X         29       Did the organization receive contributions of art, histofical heasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I       30       X         31       Did the organization inquidate, terminate, or dissoftw and cease operations?       If 'Yes," complete Schedule N, Part I       31       X         32       Via the organization inquidate, terminate, or dissoftw and cease operations?       If 'Yes," complete Schedule R, Part I, III, or IV, and Part V, Iine 1       33       X         33       X	26				
27       Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereot, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III       27       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):       28       X       28       X         29       A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28       X         29       Did the organization receive more than \$25,000 in non cash contributions? If "Yes," complete Schedule L, Part IV       28       X         29       Did the organization receive more than \$25,000 in non cash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization inguidate, terminate, or dissofte and cease operations? If "Yes," complete Schedule M       30       X         31       Did the organization onellow difter transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II       31       X         32       Did the organization receive and thenthy disregarded as separate from the organization under Regulations sections 30.707.2 and 30.707.97 Jf "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1       33       X         33       Did the organization have					- <b>v</b>
contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III       27       X         28       Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV)       28a       X         24       A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         25       A nentity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of ant, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I       30       X         31       X       31       X       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       33       X         33       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II       33       X         34       X       Schedule N, Part II       33       X       Schedule N, Part I			26		
of any of these persons? If "Yes," complete Schedule L, Part II       27       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV       28a       X         28       A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         29       A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV       28c       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N       20       X         31       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I       30       X         32       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part II       30       X         31       Did the organization receive more than \$25,000 receive than \$25,0	27				
28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):       28a       X         a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         30       Did the organization receive more than \$25,000 in on cash contributions? If "Yes," complete Schedule M       29       X         31       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I       30       X         32       Did the organization inguidate, terminate, or dissolve and cease operations?       If "Yes," complete Schedule N, Part I       31       X         33       Did the organization sell, exchange, dispose 0f, or transfer more than 25% of its net assets? If "Yes," complete Schedule A, Part II, III, or IV, and Part V, line 1       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1       35a       X         35a       X <td></td> <td></td> <td>07</td> <td></td> <td>v</td>			07		v
instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule M b A family member of a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule M b Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I bid the organization receive contributions of art, historical treasures, or other similar assets? If "Yes," complete Schedule N, Part I bid the organization sell, exchange, dispose of or transfer more than 25% of fits net assets? If "Yes," complete Schedule N, Part I bid the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1 bid the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1 bid the organization. Did the organization mether by any memt from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? bid "Yes," complete Schedule R, Part V, line 2 bid the organization complete Schedule R, Part V, line 2 bid the organization conduct more than 5% of its activities through an entity that is not a related organization? bid "Yes," complete Schedule Q and provide explanations in Schedule C for Part VI, lines 11b and 19? bid the orga	00		21		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       Pasa       X         b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       Pasa       X         c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       Pase       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       Pase       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I       Pase       X         31       Did the organization sell, exchange, dispose on or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       Past N, Part I       Past N, Part I         32       Did 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       Past N, line 1       Past N, line 1         33       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       Part V, line 1       Past N, line 2       Part V, line 1         34       Was the organization neares the payment from or enage in any transaction with a controlled entity within the meaning of section 512(b)(13)?       Part V, line 1       Part V, line 2       Part V, line 2       Pa	20				
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28b       X         c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28c       X         29       Did the organization receive more than \$25,000 in non-cash cotifubutions? If "Yes," complete Schedule L, Part IV       28c       X         30       Did the organization receive more than \$25,000 in non-cash cotifubutions? If "Yes," complete Schedule M       30       X         31       Did the organization incuive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I       30       X         32       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       31       32       X         33       Did the organization neated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1       34       X         34       Was the organization have a controlled entity within the meaning of section 512(b)(13)?       Jat       X         Jb If the organization have a controlled entity within the meaning of section 512(b)(13)?       Jat       X         Jb If the organization have a controlled entity within the meaning of section 512(b)(13)?       Jat       X	2		282		x
c       An entity of which a current or former officer, director, trustee, or Key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV       28       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       30       X         31       Did the organization sell, exchange, dispose 0, of transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       31       X         32       Did the organization sell, exchange, dispose 0, of transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       32       X         33       Did the organization related to any tax exempt or taxable entity? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization nee a controlled entity within the meaning of section 512(b)(13)?       34       X         35a       Did the organization. Sid the organization make any transfers to an exempt non-charitable related organization?       35a       X         35a       Did the organization conduct more than 5% of its activities through an entity that is not a related organization?       36       X         35b       Did the organization conduct more than 5% of					
director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV       28c       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I       30       X         31       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I       31       X         32       Did the organization sell, exchange, dispose of or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II       31       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I       33       X         34       Was the organization nave a controlled entity within the meaning of section 512(b)(13)?       35a       X         35a       Did the organization nave a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(C)(3) organizations. Did the organization make any transfers to an exempt on-charitable related organization?       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization?       36 <td></td> <td></td> <td>200</td> <td></td> <td></td>			200		
29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       30       X         31       Did the organization liquidate, terminate, or dissolve and cease operations?       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       32       X         33       Did the organization osell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       32       X         33       Did the organization neutrophy of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part I       33       X         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       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization conduct more than 5% of its activitites through an entity tha	Ŭ		28c		x
30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       30       X         31       Did the organization liquidate, terminate, or dissofte and cease operations?       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       32       X         33       Did the organization own 100% of an ently disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part I       32       X         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       33       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V, line 2       36       X         37       Did the organization complete Schedule O and provide explanations in Schedule O, Fart V, line 1       37       X         38       X       Y       X       X         39       Did the organization conduct more than 59% of its activities through an entity that is not a	29			Х	
contributions? /f "Yes," complete Schedule M       30       X         31       Did the organization liquidate, terminate, or dissolve and cease operations?       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? /f "Yes," complete       31       X         33       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? /f "Yes," complete       32       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701.2 and 301.7701.3? /f "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? /f "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization nave a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes," complete Schedule R, Part V, line 2       35b       35a       X         36       Section 501(c)(3) organization. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization complete Schedule O. and provide explanations in Schedule O. Part VI lines 11b and 19?       36       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, l					
31       Did the organization liquidate, terminate, or dissolve and cease operations?       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       32       X         33       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       32       X         34       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization netated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization netated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization netate to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part V, line 2       35a       X         36       Section 5012(b)(13)? If "Yes," complete Schedule R, Part V, line 2       36       X         37       Did the organization. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         38       Did the organization complete Schedule R, Part V, line 2       36       X <td< td=""><td></td><td></td><td>30</td><td></td><td>x</td></td<>			30		x
If "Yes," complete Schedule N, Part I       31       X         32       Did the organization sell, exchange, dispose of or transfer more than 25% of its net assets? If "Yes," complete       32       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701.3? If "Yes," complete Schedule R, Part I       33       X         34       X       33       X       33       X         35a       Did 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       33       X         35a       Did 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       X         35a       Did the organization related to any tax-exempt or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38       X         37       Statements Regarding Other	31				
32       Did the organization sell, exchange, dispose of or transfer more than 25% of its net assets? If "Yes," complete       32       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       33       X         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       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes," complete Schedule R, Part V, line 2       35b       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       37       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       36       X         38       Did the organization complete Schedule O condex to complete Schedule O for Part VI, lines 11b and 19?       38       X         39       Did the organization complete Schedule O conduct more tax purposes? If "Yes," complete Schedule R, Part VI       37       X         30       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI,			31		x
Schedule N, Part II       32       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701.2 and 301.7701.3? If "Yes," complete Schedule R, Part I       33       X         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       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes," to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? 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       X         37       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI       37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI lines 11b and 19?       38       X         9       Part V       Statements Regarding Other IRS Filings and Tax Compliance       38       X         9       Check if Schedule O contains a response or note to any line in this Part V       1a       38       X <td< td=""><td>32</td><td>Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete</td><td></td><td></td><td></td></td<>	32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
<ul> <li>33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I</li> <li>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</li> <li>34 X</li> <li>35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?</li> <li>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)?</li> <li>b If "Yes," complete Schedule R, Part V, line 2</li> <li>36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?</li> <li>If "Yes," complete Schedule R, Part V, line 2</li> <li>36 X</li> <li>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.</li> <li>38 X</li> <li>Bid the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?</li> <li>Note. All Form 990 filers are required to complete Schedule O</li> <li>Part V</li> <li>Statements Regarding Other IRS Filings and Tax Compliance</li> <li>Check if Schedule O contains a response or note to any line in this Part V</li> <li>1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable</li> <li>b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable</li> <li>c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming</li> <li>(gambling) winnings to prize winners?</li> </ul>			32		x
sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 X 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 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V  1a Enter the number reported in Box 3 of Form 1096. Enter -0 if not applicable b Enter the number of Forms W-2G included in line 1a. Enter -0 if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes," to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2       35b       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38       X         Note. All Form 990 filers are required to complete Schedule O       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance       Yes       No         1a       38       Of the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming       10       0         1a       Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable <t< td=""><td></td><td></td><td>33</td><td>Х</td><td></td></t<>			33	Х	
Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2       35b       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance       Yes       Yes       No         1a       Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable       1a       38       1b       0         b       Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable       1a       38       1b       0       1c       X	34				
35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2       35b       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38       X         98       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38       X         98       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38       X         98       Did the organization Box 3 of Form 1096. Enter -0- if not applicable       1a       38       X         99       Flerer the number of Forms W-2G included in line 1a. Enter -0- if not applicable       1a       38       1b       0         90       Did the organization comply wi		Part V, line 1	34		
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?       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization       36       X         38       Did the organization conduct more than 5% of its activities through an entity that is not a related organization       37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       37       X         38       Did the organization complete Schedule O complete Schedule O       38       X         Note. All Form 990 filers are required to complete Schedule O         Yes Note. All Form 990 filers are required to complete Schedule O         Yes Note. All Form 990 filers are required to complete Schedule O         Yes No         It is the number reported in Box 3 of Form 1096. Enter -0- if not applicable         b       Itb       0         It is the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	35 a		35a		X
36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization       36       X         38       Did the organization complete Schedule R, Part V, line 2       37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38       X         Note. All Form 990 filers are required to complete Schedule O         Yes, "compliance         Check if Schedule O contains a response or note to any line in this Part V         Yes No         1a       Tal       38         b       Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable       1a       38       1b       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming       1c       X	b				
If "Yes," complete Schedule R, Part V, line 2       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38       X         9at V       Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V       1       1       38         1a       1a       38       1       1       1       1         b       Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable       1			35b		
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       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38       X         98       Note. All Form 990 filers are required to complete Schedule O       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V       38       Yes       No         1a       1a       38       1b       0	36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>			36		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?         38 X         Part V         Statements Regarding Other IRS Filings and Tax Compliance         Check if Schedule O contains a response or note to any line in this Part V         In the number reported in Box 3 of Form 1096. Enter -0- if not applicable         In the number of Forms W-2G included in line 1a. Enter -0- if not applicable         In the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	37				
Note. All Form 990 filers are required to complete Schedule 0       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule 0 contains a response or note to any line in this Part V       Yes       No         1a       Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable       1a       38       Yes       No         b       Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable       1b       0       Image: Complete Schedule Schedu			37		X
Part V       Statements Regarding Other IRS Filings and Tax Compliance         Check if Schedule O contains a response or note to any line in this Part V       Image: Check if Schedule O contains a response or note to any line in this Part V         1a       1a       38         b       Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable       Image: Check if Schedule O contains a response or note to any line in this Part V         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1c       X	38				
Check if Schedule O contains a response or note to any line in this Part V         Yes No         1a       1a       38         b       Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable       1a       1b       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1c       X	Dar		38	Х	
1a       Ta       Ta <td< td=""><td>Par</td><td></td><td></td><td></td><td></td></td<>	Par				
1a       38         b       Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable       1a       38         b       Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable       1b       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1c       X				 M -	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable       1b       0         c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       1c       X	4 -	Enter the number reported in Pay 2 of Earm 1006. Enter 0, if not applicable 1, 20		res	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?					
(gambling) winnings to prize winners?					
	C		10	x	
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Form	990 (2018) MUSKINGUM COUNTY COMMUNITY FOUNDATION 31-1147	022	Р	age <b>5</b>
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 9			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
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			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
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			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
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Form **990** (2018)

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Form 990	(2018)
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#### MUSKINGUM COUNTY COMMUNITY FOUNDATION

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

						Yes	N
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		19			
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.						
b	Enter the number of voting members included in line 1a, above, who are independent	1b		19			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with	anv other				
-	officer, director, trustee, or key employee?				2		X
3	Did the organization delegate control over management duties customarily performed by or under the						
Ũ	of officers, directors, or trustees, or key employees to a management company or other person?		•		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 99				4		X
<del>-</del> 5	Did the organization become aware during the year of a significant diversion of the organization's ass				5		X
					6		X
6 70	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or ap				0		
7a					7-		X
Ŀ.	more members of the governing body?				7a		
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, st		iders, or				ι.
_	persons other than the governing body?				7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the yea		-		_	37	
а	The governing body?				8a	X	
b	Each committee with authority to act on behalf of the governing body?				8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ched a	t the				
	organization's mailing address? If "Yes." provide the names and addresses in Schedule O				9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re-	venue	Code.)				
						Yes	
l0a	Did the organization have local chapters, branches, or affiliates?				10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such cha						
	and branches to ensure their operations are consistent with the organization's exempt purposes?				10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	befor	e filing the	form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.						
I2a	Did the organization have a written conflict of interest policy? If "No," go to line 13				12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise				12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	′es." d	escribe				
	in Schedule O how this was done	,			12c	Х	
13	Did the organization have a written whistleblower policy?				13	Х	
14	Did the organization have a written document retention and destruction policy?				14	Х	
15	Did the process for determining compensation of the following persons include a review and approval						
-	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official				15a	х	
	Other officers or key employees of the organization				15b		X
2	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				100		
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	ont w	ith a				
IUa					16a		X
h	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat				104		
D	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	•	•				
					16b		
Sec	exempt status with respect to such arrangements?				100		
17	List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright$ OH						
17 18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and	d aan	T (Section P	501(0)(3)0	only	availat	nle
	for public inspection. Indicate how you made these available. Check all that applicable, soo, and	u 000		01(0)(0)3	Offig)	avanar	
	X       Own website       X       Another's website       X       Upon request       Other (explain	in Co	hodula ()				
10	Describe in Schedule O whether (and if so, how) the organization made its governing documents, con		,	liov and	linona	ial	
19		mict 0	r interest po	mey, and	maric	a	
0	statements available to the public during the tax year.	ko	d voe sud-	•			
20	State the name, address, and telephone number of the person who possesses the organization's boo THE OPCANTZATION = 740 - 453 - 5192	ks and	a records	▶			
	THE ORGANIZATION - 740-453-5192 534 PUTNAM AVENUE, ZANESVILLE, OH 43701						
					Γ	990	/00
3200F	§ 12-31-18				rurm	220	(20)

Form 990 (20	MUSKINGUM C	OUNTY C	OMMUNITY	FOUNDATION	31-1147022	Page 7	
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated							
	Employees, and Independent Co Check if Schedule O contains a response of			11			
	Officers, Directors, Trustees, Key Empl	,				·	

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A)	(B)	l	un∠a		<u>CON</u> C)	iper	Salt	(D)	(E)	(F)
Name and Title	Average			Pos	itior			Reportable	Reportable	Estimated
	hours per	box	not c , unle	ss per	rson i	s both	n an	compensation	compensation	amount of
	week	offi	cer an	nd a di I	irecto	or/trus	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or dii	66			ated		organization	(W-2/1099-MISC)	from the
	related organizations	ustee	trust		ee	bens		(W-2/1099-MISC)		organization and related
	below	lual tr	tional		nploy	st con	_			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizationo
(1) ALTON THOMPSON	1.00		_		-		-	NO NO		
TRUSTEE		x						0.	0.	0.
(2) BARB HANSEN	2.00									
TRUSTEE		X						0.	0.	0.
(3) ALANA RYAN	2.00									
PRESIDENT		Х		Х				0.	0.	0.
(4) BRENTON BAKER	1.00			$\mathbf{O}$						
TRUSTEE		Х	0					0.	0.	0.
(5) PAUL BROWN	1.00									
TRUSTEE		х						0.	0.	0.
(6) MATT JOSEPH	1.00									
COUNCIL PRESIDENT		Х						0.	0.	0.
(7) MATTHEW ELLI	2.00									
VICE PRESIDENT		х		X				0.	0.	0.
(8) KARLA FRYE	1.00									
SECRETARY		Х		X				0.	0.	0.
(9) SUSAN HOLDREN	1.00									•
TRUSTEE	1 0 0	Х						0.	0.	0.
(10) AL IACOVONE	1.00								0	0
TRUSTEE	1 0 0	Х						0.	0.	0.
(11) ANITA JACKSON	1.00								0	0
TRUSTEE	1.00	Х						0.	0.	0.
(12) CHRIS OLNEY TRUSTEE	1.00	x						0.	0.	0.
(13) PATRICK NASH	1.00	<u>^</u>		-				U •	0.	0.
TRUSTEE	1.00	x						0.	0.	0.
(14) MARY JANE SHACKELFORD	1.00	^						0.	0.	0.
TRUSTEE	<u> </u>	x						0.	0.	0.
(15) EVA SIEBER	1.00	<u>^</u>		-	-			0.		
TRUSTEE		x						0.	0.	0.
(16) CLARICE HAGUE	1.00	<u> </u>							Ŭ •	<b>.</b>
CYF PRESIDENT		x						0.	0.	0.
(17) SUSAN STUBBINS	1.00									
TRUSTEE		x						0.	0.	0.
832007 12-31-18										Form <b>990</b> (2018)

832007 12-31-18

Form 990 (2018)

15070812 755878 503192

	I COUNTY	<u> </u>	'OM	MU	ΝI	ΤY	F	OUNDATION	31-11	47(	022	P	age <b>8</b>
Part VII Section A. Officers, Directors, Trust	tees, Key Emp	oloy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)				
(A)	(B)	(C)						(D)	(E)			(F)	
Name and title	Average	(10		Pos				Reportable	Reportable		Es	timate	ed
	hours per	box	, unles	ss per	rson i	than c s both	an	compensation	compensation		an	nount	of
	week		cer an	ıd a di	irecto	r/trust	tee)	from	from related			other	
	(list any	ector						the	organizations			pensa	
	hours for related	or dir	96			ated		organization	(W-2/1099-MIS0	C)		om th	
	organizations	ustee	truste		e.	ipens		(W-2/1099-MISC)			•	anizat	
	below	ual tr	tional		ploye	t com /ee	-					d relat anizati	
	line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former				orga	inzati	0113
(18) JOHN (YAN) SUN	1.00	=	=	0	×	e ⊥	ш.						
TRUSTEE		x						0.		٥.			0.
(19) JIM WILSON	1.00									<u> </u>			
TRUSTEE		x						0.		٥.			Ο.
(20) GERALDINE ZYLINSKY	1.00									••			<u> </u>
TRUSTEE		x						0.		٥.			Ο.
(21) TOM POORMAN	1.00									••			<u> </u>
TRUSTEE		x						0.		٥.			Ο.
(22) BRIAN WAGNER	40.00									••			<u> </u>
CHIEF EXECUTIVE OFFICER				x				92,871.		٥.		4,4	74.
				- 23				52,011		••		<u>, </u>	/ = •
									P				
								$\langle \rangle$					
1h Sub-total					C			92,871.		0.		4,4	74.
1b Sub-total c Total from continuation sheets to Part VI	Section A							0.		0.		- / -	0.
d Total (add lines 1b and 1c)								92,871.		0.			
2 Total number of individuals (including but no				d ab		) wh				••		- / -	/ 1 0
compensation from the organization	of minited to th	036	liste	uau	000	<i>y</i> wii	010	ceived more than \$100,					0
		<del>)</del>	*									Yes	No
<b>3</b> Did the organization list any <b>former</b> officer,	director or tri	istor	a ka	v on	nnlo	V00	ort	highest compensated er	nnlovee on	ſ			
line 1a? If "Yes," complete Schedule J for si	<b>X N N</b>									ŀ	3	_	х
<ul><li>For any individual listed on line 1a, is the su</li></ul>										··	5		
and related organizations greater than \$150										ŀ	4		х
5 Did any person listed on line 1a receive or a													
rendered to the organization? If "Yes," com							ale	organization or munic	Juai IUI Services	-	5		x
Section B. Independent Contractors		3 1 10	JI SU		Jers	011 .					5		
1 Complete this table for your five highest cor	mpensated ind	lono	nder	nt co	ontra	actor	e th	nat received more than \$	100 000 of comp	neat	tion fro	m	
the organization. Report compensation for t	-									nout		,,,,,	
(A)	ne oalendar ye	Jure	- Turi	ig w				(B)			(0	3)	
Name and business	address	NC	ONE	2				Description of s	ervices	С	ompe	nsatio	n
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 0													
												000	

Form **990** (2018)

832008 12-31-18

	orm 990 (2018) MUSKINGUM COUNTY COMMUNITY FOUNDATION 31-1147022 Page 9										
Pa	rt VI	II Statement of Reven	ue								
		Check if Schedule O conta	ains a response	or note to any lin							
					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	<b>(D)</b> Revenue excluded from tax under sections 512 - 514			
its ts	1 a	Federated campaigns	1a								
iran	b	Membership dues	1b								
Amo,	с	Fundraising events	1c	72,717.							
ar /	d	Related organizations	1d								
s, C	е	Government grants (contributi	ons) <b>1e</b>								
r Si	f	All other contributions, gifts, grant	s, and								
but		similar amounts not included abov	/e <b>1f</b>	1,775,318.							
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1	a-1f: \$	178,713.							
an	h	Total. Add lines 1a-1f		🕨	1,848,035.						
				Business Code							
e	2 a	ADMINISTRATIVE FEES		541900	246,506.	246,506.					
Program Service Revenue	b										
n Se	С										
ran Sevi	d	l									
rog	е										
Ā	f	All other program service reven									
	g	Total. Add lines 2a-2f			246,506.						
	3	Investment income (including			764 264			764 264			
		other similar amounts)			764,364.			764,364.			
	4	Income from investment of tax									
	5	Royalties									
	6 -	Cross rests	(i) Real 5,200.	(ii) Personal	5						
	6 a		0.		0						
	b		5,200.		$\mathbf{\mathcal{O}}$						
	c	Net rental income or (loss)	5,200.		5,200.			5,200.			
		Gross amount from sales of	(i) Securities	(ii) Other	-,			-,			
	7 4	assets other than inventory	5,838,873								
	b	Less: cost or other basis	, ,	$\sim$							
		and sales expenses	5,016,178.								
	с	Gain or (loss)	822,695.								
	d	Net gain or (loss)		►	822,695.			822,695.			
Other Revenue		Gross income from fundraising including \$ 72,	g events (not								
eve		contributions reported on line									
ŗ		Part IV, line 18		111,940.							
the	b	Less: direct expenses									
0	с	Net income or (loss) from fund	raising events	►	25,850.			25,850.			
	9 a	Gross income from gaming ac									
		Part IV, line 19									
		Less: direct expenses									
		Net income or (loss) from gam		►							
	10 a	Gross sales of inventory, less i									
		and allowances									
		Less: cost of goods sold									
	с	<ul> <li>Net income or (loss) from sales</li> </ul>									
		Miscellaneous Revenue		Business Code							
	11 a										
	b										
	C			900099	2 740	3,749.					
	d				3,749.	,					
		Total. Add lines 11a-11d			3,749. 3,716,399.		0.	1,618,109.			
00000	12	Total revenue. See instructions			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	250,255.	0.	Form <b>990</b> (2018)			
83200	9 12-31	1-10						FULLI 200 (2018)			

Part IX Statement of Functional Expenses

MUSKINGUM COUNTY COMMUNITY FOUNDATION

Secti	on 501(c)(3) and 501(c)(4) organizations must comp			nplete column (A).	
	Check if Schedule O contains a respon	· · · · · · · · · · · · · · · · · · ·			
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1,005,541.	1,005,541.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	187,700.	187,700.		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	97,345.	68,141.	14,602.	14,602.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	221,868.	98,519.	31,076.	92,273.
8	Pension plan accruals and contributions (include	-	-		· · ·
-	section 401(k) and 403(b) employer contributions)	10,447.	4,098.	667.	5.682.
9	Other employee benefits	10,447. 18,319.	7,727.	667. 1,085.	5,682. 9,507. 8,183.
-		32,852.	19,054.	5,615.	2,307 8 183
10	Payroll taxes	54,054.	13,034.	5,013.	0,103.
11	Fees for services (non-employees):		.01		
а	Management	24 564	5 500		
	Legal	31,564.	5,509.	20,546.	5,509.
С	Accounting	23,522.		23,522.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	255,777.		255,777.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
-	column (A) amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion	21,327.	2,133.	17,061.	2,133
13	Office expenses	53,919.	2,133. 5,392.	43,135.	2,133. 5,392.
		5575151	575521	10,100	57552
14	Information technology				
15	Royalties	46 022	4 602	26 010	1 602
16	Occupancy	46,023.	4,602.	36,819.	4,602.
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	9,908.	991.	6,910.	2,007.
20	Interest	118,667.		118,667.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	21,132.	11,623.	9,509.	
23	Insurance	14,601.	1,460.	11,681.	1,460.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	UNITRUST ANNUITY	14,100.	1,410.	11,280.	1,410.
b	CONTRACTED SERVICES	11,718.	1,172.	9,374.	1,172.
с	SPECIAL PROJECT EXPENSE	5,333.	533.	4,267.	533.
d	DUES AND SUBSCRIPTIONS	5,129.	513.	3,141.	1,475.
	All other expenses	35,814.	3,582.	28,651.	3,581.
25	Total functional expenses. Add lines 1 through 24e	2,242,606.	1,429,700.	653,385.	159,521.
<u>25</u> 26	Joint costs. Complete this line only if the organization	_,,	_,,,	,	
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

10

832010 12-31-18

Check here

15070812 755878 503192

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

2018.04010 MUSKINGUM COUNTY COMMUNIT 503192\_1

Form 990 (2018)

11 2018.04010 MUSKINGUM COUNTY COMMUNIT 503192\_1

Form 990 (2018)

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		Check if Schedule O contains a response or note to any line in this Part X			
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	384,396.	1	462,239.
	2	Savings and temporary cash investments	898,936.	2	1,230,337.
	3	Pledges and grants receivable, net	384,964.	3	266,685.
	4	Accounts receivable, net	63,002.	4	49,147.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ŝ		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net	7,182,500.	7	7,182,500.
Ř	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	2,129.	9	2,344.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 1,761,678.			
	b	Less: accumulated depreciation	1,405,899.	10c	1,389,975.
	11	Investments - publicly traded securities	20,998,366.	11	19,614,913.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets	)	14	
	15	Other assets. See Part IV, line 11	445,579.	15	473,853.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	31,765,771.	16	30,671,993.
	17	Accounts payable and accrued expenses	19,966.	17	16,677.
	18	Grants payable	16,058.	18	7,475.
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Se	22	Loans and other payables to current and former officers, directors, trustees,			
iliti		key employees, highest compensated employees, and disqualified persons.			
Liabilities		Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	2,531,613.	23	2,537,082.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of	1 000 850		045 041
		Schedule D	1,088,758.	25	847,341.
	26	Total liabilities. Add lines 17 through 25	3,656,395.	26	3,408,575.
		Organizations that follow SFAS 117 (ASC 958), check here ► X and			
ses		complete lines 27 through 29, and lines 33 and 34.	27 026 722		
anc	27	Unrestricted net assets	27,826,732. 282,644.	27	<u>27,104,047.</u> 159,371.
Bal	28	Temporarily restricted net assets	202,044.	28	159,571.
pu	29	Permanently restricted net assets		29	
Ŀ		Organizations that do not follow SFAS 117 (ASC 958), check here			
s or		and complete lines 30 through 34.		- 00	
sets	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	28,109,376.	32	27,263,418.
-	33	Total net assets or fund balances	31,765,771.	33	30,671,993.
	34	Total liabilities and net assets/fund balances	51,705,771.	34	<u> </u>

Form 990 (2018)
Part X | Balance Sheet

Form	1990 (2018) MUSKINGUM COUNTY COMMUNITY FOUNDATION	31-1	147022	Pa	age 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,71		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,24		
3	Revenue less expenses. Subtract line 2 from line 1	3	1,47		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	28,10		
5	Net unrealized gains (losses) on investments	5	-2,28	1,8	27.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	3	7,9	24.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	27,26	3,4	18.
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 in Schedule	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		<u>2</u> a		X
	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	X	<u> </u>
	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:				
	X Separate basis 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				
	review, or compilation of its financial statements and selection of an independent accountant?		<u>2c</u>	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	-			
_	Act and OMB Circular A-133?		<u>3a</u>		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	000	(2018)
	.*.C)		Forn	1 990	(2018)
	$\sim$				

SCHEDU	LE A
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(Form 990 or 990-EZ)

## **Public Charity Status and Public Support**

OMB No. 1545-0047

<u>2018</u>

to Dublid

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

							pen to Public Inspection				
Nam	ne of t	the organizati									ification numbe
-					TY COMMUNITY					1-1	147022
	rt I				All organizations must co			e instructions	6.		
The	organ	ization is not a	a private found	ation because it is: (F	For lines 1 through 12, cl	neck only	one box.)				
1		A church, co	nvention of ch	urches, or associatio	n of churches described	in sectio	on 170(b)(1	I)(A)(i).			
2		A school des	cribed in sect	ion 170(b)(1)(A)(ii). (	Attach Schedule E (Form	n 990 or 99	90-EZ).)				
3		A hospital or	a cooperative	hospital service orga	anization described in se	ection 170	)(b)(1)(A)(ii	ii).			
4		A medical res	search organiz	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A	)(iii). Enter	the ho	spital's name,
		city, and stat									
5		An organizati	ion operated fo	or the benefit of a col	lege or university owned	or operat	ed by a go	overnmental u	nit describe	ed in	
		section 170	( <b>b)(1)(A)(iv).</b> (C	Complete Part II.)							
6			-	-	nental unit described in			.,			
7		An organizati	ion that norma	lly receives a substa	ntial part of its support fr	om a gove	ernmental	unit or from th	ne general p	oublic	described in
		section 170(	<b>b)(1)(A)(vi).</b> (C	omplete Part II.)							
8	X	A community	/ trust describe	ed in section 170(b)(	(1)(A)(vi). (Complete Par	t II.)					
9		An agricultur	al research org	anization described	in section 170(b)(1)(A)(	ix) operate	ed in conju	inction with a	land-grant	colleg	e
		or university	or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state of	the college	e or	
		university:						<u> </u>			
10		•		• • • •	than 33 1/3% of its supp				•	•	•
					ct to certain exceptions,						
		income and u	unrelated busir	ness taxable income	(less section 511 tax) fro	m busines	sses acqui	red by the org	anization a	after Ju	ine 30, 1975.
		See section	509(a)(2). (Co	mplete Part III.)							
11	Ц	-	-	-	vely to test for public sat						
12					vely for the benefit of, to						
					d in section 509(a)(1) o					Check	the box in
		-			f supporting organization						
а					upervised, or controlled	• • • •	-				
					gularly appoint or elect a	majority c	of the direc	tors or truste	es of the su	upporti	ng
				complete Part IV, Se							
b					or controlled in connect						
				· · · · · · · · · · · · · · · · · · ·	anization vested in the sa	ame perso	ns that co	ntrol or mana	ge the supp	oorted	
		¬ ~	.,	t complete Part IV,							
С			-	-	g organization operated				ly integrate	ed with	,
	_	- ··	0		). You must complete I	,	,				
d					orting organization oper				-		-
					ation generally must sat				l an attentiv	/eness	
	_	- ·	,	* *	nplete Part IV, Sections						
е			•		written determination from			Туре I, Туре	II, Type III		
_		-		• •	nally integrated supporting	ng organiz	ation.				
f			of supported of	•							
g		i) Name of supp		n about the supporte (ii) EIN	d organization(s). (iii) Type of organization	(iv) Is the orga	anization listed	(v) Amount o	fmonetary	(vi)	Amount of other
	,	organizatior		(1) 2.14	(described on lines 1-10	in your governi Yes	ng document?	support (see in	,	· ·	rt (see instructions
					above (see instructions))	Tes			,		
Tet											
Tota	11									L	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 832021 10-11-18 Schedule A (Form 990 or 990-EZ) 2018 13

# Schedule A (Form 990 or 990-EZ) 2018 MUSKINGUM COUNTY COMMUNITY FOUNDATION 31-1147022 Page 2 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.)

See	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1819218.	1472969.	1701375.	1483543.	1848035.	8325140.
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 $\dots$						
4	Total. Add lines 1 through 3	1819218.	1472969.	1701375.	1483543.	1848035.	8325140.
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)						852,777.
	Public support. Subtract line 5 from line 4.						7472363.
Se	ction B. Total Support			0.			
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	(d) 2017	<b>(e)</b> 2018	(f) Total
7	Amounts from line 4	1819218.	1472969.	1701375.	1483543.	1848035.	8325140.
8	Gross income from interest,						
	dividends, payments received on			5			
	securities loans, rents, royalties,						
	and income from similar sources $\dots$	619,347.	585,975.	595,315.	612,484.	764,364.	3177485.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on	-2,600.					-2,600.
10	Other income. Do not include gain						
	or loss from the sale of capital		•				
	assets (Explain in Part VI.)	37,664.	32,169.	35,922.	30,844.	8,949.	
11	Total support. Add lines 7 through 10						11645573.
12	Gross receipts from related activities,	etc. (see instructio	ons)			12 1	,561,316.
13	First five years. If the Form 990 is for	r the organization's	first, second, third	d, fourth, or fifth ta	x year as a sectior	n 501(c)(3)	
_	organization, check this box and stor	o here	·····				
	ction C. Computation of Publi					r - 1	
	Public support percentage for 2018 (I					14	64.16 %
	Public support percentage from 2017					15	46.45 %
<b>16</b> a	<b>33 1/3% support test - 2018.</b> If the o	0			14 is 33 1/3% or m	ore, check this box	
	stop here. The organization qualifies		-				
b	<b>33 1/3% support test - 2017.</b> If the o				line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac			•	•	rt VI how the organ	lization
	meets the "facts-and-circumstances"	•		,	•		
b	10% -facts-and-circumstances test						
	more, and if the organization meets the				•		;
	organization meets the "facts-and-circ		•	•			
18	Private foundation. If the organization	on did not check a	box on line 13, 16a	a, 16b, 17a, or 17b			
					Sche	edule A (Form 990	or 990-EZ) 2018

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### Schedule A (Form 990 or 990-EZ) 2018 MUSKINGUM COUNTY COMMUNITY FOUNDATION 31-1147022 Page 3 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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, 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			(			
7a	Amounts included on lines 1, 2, and				$\mathbf{\nabla}$		
	3 received from disqualified persons			0			
k	Amounts included on lines 2 and 3 received			30			
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
Ċ	Add lines 7a and 7b			5			
	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support						-
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources		•				
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is fo	r the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectior	n 501(c)(3) organiz	zation,
	check this box and stop here	<u></u>					<b>&gt;</b>
Se	ction C. Computation of Publ	ic Support Per	centage				
15	Public support percentage for 2018 (	line 8, column (f), d	ivided by line 13,	column (f))		15	%
	Public support percentage from 2017					16	%
	ction D. Computation of Inves		•				
17	Investment income percentage for 2	<b>)18</b> (line 10c, colur	nn (f), divided by I	ine 13, column (f))		17	%
	Investment income percentage from					18	%
19a	a 33 1/3% support tests - 2018. If the	-					17 is not
	more than 33 1/3%, check this box a	-	•		•••		▶∟
k	<b>33 1/3% support tests - 2017.</b> If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check th			
8320	23 10-11-18		4 -		Sch	edule A (Form 99	90 or 990-EZ) 2018
			15	)			

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#### Schedule A (Form 990 or 990-EZ) 2018 MUSKINGUM COUNTY COMMUNITY FOUNDATION 31-1147022 Page 4 Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of 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 (b) and (c) 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")? "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to 6 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 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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 in 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 disgualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? 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 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.)

16

9c 10a 10b

No Yes

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

#### Schedule A (Form 990 or 990-EZ) 2018

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# Schedule A (Form 990 or 990 EZ) 2018 MUSKINGUM COUNTY COMMUNITY FOUNDATION 31-1147022 Page 5 Part 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 in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	_		
•	organization's governing documents in effect on the date of notification, to the extent not previously provided?	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	0		
2	the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described in $(2)$ , did the exception is supported organizations have a	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
' a	The organization satisfied the Activities Test. <i>Complete</i> <b>line 2</b> below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see insti	uctions)		
2	Activities Test. Answer (a) and (b) 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 in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? 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 (a) and (b) 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? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

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Schedule A (Form 990 or 990-EZ) 2018

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Sche	dule A (Form 990 or 990-EZ) 2018 MUSKINGUM COUNTY COMMUNI	TY I	FOUNDATION	31-1147022 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying t	rust or	n Nov. 20, 1970 (explain	in Part VI.) See instructions. Al
	other Type III non-functionally integrated supporting organizations must comp	plete S	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
_7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
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	0		
	factors (explain in detail in Part VI):		/	
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
_1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally i	integra	ated Type III supporting of	organization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2018

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### Schedule A (Form 990 or 990-EZ) 2018 MUSKINGUM COUNTY COMMUNITY FOUNDATION 31-1147022 Page 7

Par	t V   Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	nizations <sub>(continued)</sub>							
Secti	on D - Distributions			Current Year						
1	Amounts paid to supported organizations to accomplish exer	npt purposes								
2	Amounts paid to perform activity that directly furthers exemp									
	organizations, in excess of income from activity									
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations	3							
4	Amounts paid to acquire exempt-use assets									
5	Qualified set-aside amounts (prior IRS approval required)									
6	Other distributions (describe in Part VI). See instructions.	Other distributions (describe in <b>Part VI</b> ). See instructions.								
7	Total annual distributions. Add lines 1 through 6.									
8	Distributions to attentive supported organizations to which the									
	(provide details in Part VI). See instructions.									
9	Distributable amount for 2018 from Section C, line 6									
10	Line 8 amount divided by line 9 amount									
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018						
1	Distributable amount for 2018 from Section C, line 6									
2	Underdistributions, if any, for years prior to 2018 (reason-									
	able cause required- explain in Part VI). See instructions.									
3	Excess distributions carryover, if any, to 2018									
a	From 2013									
b	From 2014									
C	From 2015	0								
d	From 2016									
e	From 2017									
f	Total of lines 3a through e									
g	Applied to underdistributions of prior years	2								
h	Applied to 2018 distributable amount									
i	Carryover from 2013 not applied (see instructions)									
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.									
4	Distributions for 2018 from Section D, line 7: \$	R								
a	Applied to underdistributions of prior years									
b	Applied to 2018 distributable amount									
c	Remainder. Subtract lines 4a and 4b from 4									
5	Remaining underdistributions for years prior to 2018, 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 2018. Subtract lines 3h									
	and 4b from line 1. For result greater than zero, explain in									
	Part VI. See instructions.									
7	Excess distributions carryover to 2019. Add lines 3j									
	and 4c.									
8	Breakdown of line 7:									
a	Excess from 2014									
b	Excess from 2015									
C	Excess from 2016									
d	Excess from 2017									
e	Excess from 2018									

Schedule A (Form 990 or 990-EZ) 2018

Schedule A	(Form 990 or 990-EZ) 20 <sup>-</sup>	18 MUSKINGUM	COUNTY	COMMUNITY	FOUNDATION	31-1147022 Pag	<u>ge 8</u>
Part VI	Supplemental Info Part IV, Section A, lines line 1; Part IV, Section D	<b>prmation.</b> Provide t 1, 2, 3b, 3c, 4b, 4c, 5 ), lines 2 and 3; Part IV	he explanatior a, 6, 9a, 9b, 9c /, Section E, lii	is required by Part II, c, 11a, 11b, and 11c; nes 1c, 2a, 2b, 3a, ai	line 10; Part II, line 17a o Part IV, Section B, lines	or 17b; Part III, line 12; 1 and 2; Part IV, Section C, V, Section B, line 1e; Part V,	
	(See instructions.)		511 E, iii ies 2, 5				
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832028 10-11-1	3				Sched	ule A (Form 990 or 990-EZ) 2	2018
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SCHED	ULE D
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Department of the Treasury

Internal Revenue Service

(Form	990)
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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.



Name of the organization

MUSKINGUM COUNTY COMMUNITY FOUNDATION

Employer identification number 31-1147022

Par	t I Organizations Maintaining Donor Advised	d Funds or Other Similar Funds	or Accour	Its. Complete if the
	organization answered "Yes" on Form 990, Part IV, line			
		(a) Donor advised funds	<b>(b)</b> Fun	ds and other accounts
1	Total number at end of year	27		24
2	Aggregate value of contributions to (during year)	234,159.		0.
3	Aggregate value of grants from (during year)	36,533.		1,000.
4	Aggregate value at end of year	2,107,605.		537,685.
5	Did the organization inform all donors and donor advisors in w	vriting that the assets held in donor advis	ed funds	
	are the organization's property, subject to the organization's e	exclusive legal control?		X Yes No
6	Did the organization inform all grantees, donors, and donor ad	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	
				X Yes 🗌 No
Par	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	on (check all that apply).		
	Preservation of land for public use (e.g., recreation or ed	ducation)	orically impor	tant land area
	Protection of natural habitat	Preservation of a cer	tified historic :	structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the form	of a conserva	tion easement on the last
	day of the tax year.	. (2)		Held at the End of the Tax Year
а			2a	
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic stru	icture included in (a)	<u>2c</u>	
d	Number of conservation easements included in (c) acquired a	fter 7/25/06, and not on a historic structu	ire	
	listed in the National Register		2d	
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	organization	during the tax
	year ▶			
4	Number of states where property subject to conservation eas	ement is located		
5	Does the organization have a written policy regarding the peri	odic monitoring, inspection, handling of		
	violations, and enforcement of the conservation easements it			
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and enforcing cons	servation ease	ements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conserva	tion easemen <sup>-</sup>	ts 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)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense	statement, ar	nd balance sheet, and
	include, if applicable, the text of the footnote to the organizati	ion's financial statements that describes	the organizati	on's accounting for
_	conservation easements.			<b>.</b> .
Par	t III Organizations Maintaining Collections of		her Simila	r Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization elected, as permitted under SFAS 116 (AS			
	historical treasures, or other similar assets held for public exh	ibition, education, or research in furthera	nce of public	service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ	bes these items.		
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement	and balance	sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	lucation, or research in furtherance of pul	olic service, p	rovide the following amounts
	relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
	(ii) Assets included in Form 990, Part X		►	\$
2	If the organization received or held works of art, historical trea	asures, or other similar assets for financia	l gain, provide	9
	the following amounts required to be reported under SFAS 11	6 (ASC 958) relating to these items:		
а	Revenue included on Form 990, Part VIII, line 1		►	\$
b	Assets included in Form 990, Part X			\$
LHA	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.		Schedule D (Form 990) 2018
832051	10-29-18			
		27		

		UM COUNTY (					47022	
Par	t III   Organizations Maintaining C	ollections of Ar	t, Historical Tre	asures, or Othe	er Simila	ar Assets	continu	ed)
3	Using the organization's acquisition, accessi	on, and other records	s, check any of the f	ollowing that are a s	ignificant	use of its c	ollection it	ems
	(check all that apply):		_					
а	Public exhibition	d		hange programs				
b	Scholarly research	e	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co		-	-		ose in Part	XIII.	
5	During the year, did the organization solicit of			•			_	
	to be sold to raise funds rather than to be ma						Yes	No
Par	t IV Escrow and Custodial Arran		ete if the organizatio	n answered "Yes" or	n Form 99	0, Part IV,	ine 9, or	
	reported an amount on Form 990, Pa							
<b>1</b> a	Is the organization an agent, trustee, custodi						٦	<u> </u>
	on Form 990, Part X?					L	Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:				<u> </u>	
							Amount	
с.	Beginning balance							
a	Additions during the year							
e	Distributions during the year				<u> </u>			
f	Ending balance Did the organization include an amount on F						Yes	No
	If "Yes," explain the arrangement in Part XIII.							
Par								
		(a) Current year	(b) Prior year	(c) Two years back		years back	(e) Four y	ears back
1a	Beginning of year balance	18,867,957.	16,155,496.	15,269,398.		080,996.		76,546.
b	Contributions	385,151.	851,799.			, 266,097.		65,448.
	Net investment earnings, gains, and losses	-607,890.	2,858,433.	1,156,525.		246,956.	7	34,844.
d	Grants or scholarships	615,830.	653,973.	365,104.		, 503,714.	4	94,769.
	Other expenditures for facilities	, , , , , , , , , , , , , , , , , , ,	5	,		,		
	and programs	149,011.	144,862.	29,442.		25,092.		56,926.
f	Administrative expenses	212,800.	198,936.	176,837.		301,933.	3. 344,147.	
g	End of year balance	17,667,577.	18,867,957.	16,155,496.	15,	269,398.	16,0	80,996.
2	Provide the estimated percentage of the cur	ent year end balance	e (line 1g, column (a)	) held as:				
а	Board designated or quasi-endowment		%					
b	Permanent endowment	%						
с	Temporarily restricted endowment	%						
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.						
3a	Are there endowment funds not in the posse	ssion of the organiza	tion that are held ar	nd administered for t	he organi	zation	_	
	by:	)					Y	'es No
	(i) unrelated organizations						3a(i)	<u>X</u>
							3a(ii)	<u> </u>
b	If "Yes" on line 3a(ii), are the related organization						3b	
4	Describe in Part XIII the intended uses of the		wment funds.					
Par	t VI Land, Buildings, and Equipm							
	Complete if the organization answere							
	Description of property	(a) Cost or o			Accumula		(d) Book v	value
	Level	basis (investn	,	. ,	epreciatio		1 0 2 0	112
	Land			0,443. 4,259.	157,1	97	1,020	
	Buildings			<u>4,259</u> . 1,390.	103,4			<u>,062.</u> ,949.
	Leasehold improvements			4,918.	<u>103,4</u> 64,8			<u>,949.</u> ,105.
	Equipment			0,668.	$\frac{04}{46}, 2$			<u>,105.</u> ,416.
	Other				40,2			<u>,410.</u> ,975.
Iota	. Add lines 1a through 1e. (Column (d) must e	guai ⊢orm 990. Part /	<u>x. column (B). line 1</u>	JC.)		. 💌 🗌	1,009	• د ا د ر

Schedule D (Form 990) 2018

	OUNTY COMMUNI	TY FOUNDATION	31-1147022 Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost	or end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
<u>(B)</u>			
<u>(C)</u>			
(D)			
(E)			
(F)(G)			
(G) (H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990 Part IV line	11c See Form 990 Part X line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation. Cost	or end-of-year market value
(1)			-
(2)			
(3)			
(4)			
(5)			
(6)		0	
(7)		30	
(8)			
(9)		5	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"		11d. See Form 990, Part X, line 15.	
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)	1		
(5)			
(6)			
(7)			
(9)			
Total. (Column (b) must equal Form 990. Part X. col. (B) lin Part X Other Liabilities.	e (5.)		
Complete if the organization answered "Yes"	on Form 990 Part IV line	11e or 11f See Form 990 Part X li	ne 25
1.         (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2) ANNUITY LIABILITY		40,960.	
(3) FUNDS HELD AS AGENCY ENDO	WMENTS	787,792.	
(4) REFUNDABLE ADVANCE		16,024.	
(5) CAPITAL LEASE		2,565.	
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 25.)	847,341.	
2. Liability for uncertain tax positions. In Part XIII, provide	,	the organization's financial stateme	ents that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII 🛛 🗌

	dule D (Form 990) 2018 MUSKINGUM COUNTY COMMUNITY FOUNDATION		1147022	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue per F	leturn.		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			
1	Total revenue, gains, and other support per audited financial statements	1	1,542,	738.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	-		
b	Donated services and use of facilities	_		
с	Recoveries of prior year grants       2c         Other (Describe in Part XIII.)       2d       108,166	_		
d			-2,173,	661
е З	•	2e 3	3,716,	399.
3 4	Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part VIII, line 12, but not on line 1:	3	5,710,	555.
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a			
b	Other (Describe in Part XIII.)			
	Add lines 4a and 4b	4c		0.
5	Total revenue. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12.)	5	3,716,	
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retur	n.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			
1	Total expenses and losses per audited financial statements	1	2,388,	696.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities 2a			
b	Prior year adjustments 2b			
с	Other losses 2c	_		
d	Other (Describe in Part XIII.) 2d 146,090	•		
е	Add lines 2a through 2d	2e	146,	090.
3	Subtract line 2e from line 1	3	2,242,	606.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	_		
b	Other (Describe in Part XIII.)	_		0
	Add lines 4a and 4b	4c	2,242,	0.
5 Pa	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	2,242,	000.
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line	1. Part	V line 2: Part VI	
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	; <del>4</del> , 1 alt		,
mico				
PAF	RT V, LINE 4:			
то	PROVIDE FINANCIAL SUPPORT FOR THE FUTURE CHARITABLE PURPO	SES	WHICH ТН	Е
ORC	GANIZATION UNDERTAKES.			
PAF	RT X, LINE 2:			
	- 40			
FIL	1 48:			
THE	E MUSKINGUM COUNTY COMMUNITY FOUNDATION IS EXEMPT FROM FED	ERAL	INCOME	
<b>m 3 3</b>	$x = \alpha$ indep there are a contrast of $x = \alpha$			
TA	XES UNDER INTERNAL REVENUE CODE SECTION 501(C)(3) AND HAD	NO U	NRELATED	
סדום	SINESS INCOME SUBJECT TO INCOME TAX FOR THE YEARS ENDED DE		<b>FD</b> 31	
<u> </u>	THESS INCOME SUBJECT TO INCOME TAX FOR THE LEARS ENDED DE		ur ji	
201	L8 AND 2017			
	16 AND 2017			
GEI	VERALLY ACCEPTED ACCOUNTING PRINCIPLES REQUIRE MANAGEMENT	<u>TO E</u>	VALUATE	

832054 10-29-18 Schedule D (Form 990) 2018

Schedule D (Form 990) 2018 MUSKINGUM COUNTY COMMUNITY FOUNDATION 31	-1147022 Page 5
Part XIII Supplemental Information (continued)	
THE LEVEL OF UNCERTAINTY RELATED TO WHETHER TAX POSITIONS TAKEN	WILL BE
SUSTAINED UPON EXAMINATION. ANY POSITIONS TAKEN THAT DO NOT MEET	Г ТНЕ
MORE-LIKELY-THAN-NOT THRESHOLD MUST BE QUANTIFIED AND RECORDED	AS A
LIABILITY FOR UNRECOGNIZED TAX BENEFITS IN THE ACCOMPANYING CONS	SOLIDATED
STATEMENT OF FINANCIAL POSITION ALONG WITH ANY ASSOCIATED INTERI	EST AND
PENALTIES THAT WOULD BE PAYABLE TO THE TAXING AUTHORITIES UPON	
EXAMINATION. MANAGEMENT BELIEVES THAT NONE OF THE TAX POSITIONS	TAKEN
WOULD MATERIALLY IMPACT THE FINANCIAL STATEMENTS AND NO SUCH LIA	ABILITIES
HAVE BEEN RECORDED.	
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
INCREASE IN CASH SURRENDER VALUE - LIFE INSURANCE	21,400.
CHANGE IN VALUE OF TRUST AGREEMENTS	676.
FUNDRAISING EXPENSES NETTED WITH REVENUE	86,090.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	108,166.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
FUNDRAISING EXPENSES NETTED AGAINST REVENUE	86,090.
IN-KIND EXPENSE ELIMINATED FOR 990	60,000.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	146,090.

Schedule D (Form 990) 2018

832055 10-29-18

SCHEDULE G	Supplemental Information Regarding Fundraising or Gaming Activities						rities	OMB No. 1545-0047			
(Form 990 or 990-EZ)	Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.							or if the	2018		
Department of the Treasury		Attach to Form 990 or Form 990-EZ.									
Internal Revenue Service		to www.irs.gov/l	Form990 for instr	uction	s and	the latest informati	on.		Open to Public Inspection		
Name of the organization		UM COUNTY	COMMINIT	V P	וזאדזר	νωτον		Employer ide	entification number		
Part I Fundrais						n Form 990, Part IV, I	ine 1				
	complete this part		5								
1 Indicate whether the	-	ed funds through		-							
a Mail solicitat	email solicitations	i				overnment grants ment grants					
d In-person sol			Maria and the difference	(	P	<b>re</b> '					
2 a Did the organization key employees list		•		•	•	flicers, directors, trus undraising services?	tees,	or Ye	s 🗌 No		
<b>b</b> If "Yes," list the 10			-			-	ne fui				
compensated at le	ast \$5,000 by the	organization.									
(i) Name and address	e of individual			(iii)	Did raiser	(iv) Gross receipts	(v)	Amount paid or retained bv)	(vi) Amount paid		
or entity (fund		(ii) Ao	ctivity	have c or cor	ustody ntrol of	from activity		fundraiser	to (or retained by) organization		
				Yes	utions?	$\sim 0$		ted in col. (i)			
				165							
						01					
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			. (								
			C)								
			- S								
			$\rightarrow$								
			•								
		<u> </u>									
Total											
3 List all states in whi				contrib	utions	or has been notified	it is	exempt from re	egistration		
or licensing.											
LHA For Paperwork Re	eduction Act Noti	ce, see the Instru	ctions for Form §	990 or	990-E	Z. 9	Sche	dule G (Form 9	990 or 990-EZ) 2018		

 Schedule G (Form 990 or 990 EZ) 2018
 MUSKINGUM
 COUNTY
 FOUNDATION
 31-1147022
 Page 2

 Part II
 Fundraising Events.
 Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000

of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events GROUNDHOG (add col. (a) through 2 1/2 MARATHONDAY col. (c)) (event type) (event type) (total number) Revenue 45,470. 97,903. 41,284. 184,657. Gross receipts 1 2,070 54,117. 16,530 72,717. 2 Less: Contributions 43,400. 43,786. 24,754 111,940. Gross income (line 1 minus line 2) 3 650 650. 4 Cash prizes 2,184. 5 Noncash prizes 142 2,326. Direct Expenses Rent/facility costs 950. 950. 6 348. 778. 1,126. 7 Food and beverages 8 Entertainment 14 116. 27 645 39 277 81,038. 9 Other direct expenses 86,090. 10 Direct expense summary. Add lines 4 through 9 in column (d) ► 25,850. 11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming Revenue bingo/progressive bingo col. (a) through col. (c)) 1 Gross revenue 2 Cash prizes Expenses 3 Noncash prizes Direct Rent/facility costs 4 Other direct expenses 5 % Yes % Yes % Yes 6 Volunteer labor No No No

7 Direct expense summary. Add lines 2 through 5 in column (d)
8 Net gaming income summary. Subtract line 7 from line 1, column (d)
9 Enter the state(s) in which the organization conducts gaming activities:
a Is the organization licensed to conduct gaming activities in each of these states?
b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?	Yes	
b If "Yes." explain:		

832082 10-03-18

Schedule G (Form 990 or 990-EZ) 2018

No

Sch	edule G (Form 990 or 990-EZ) 2018 MUSKINGUM COUNTY COMMUNITY FOUNDATION 31-1	147022	Page 3
	Does the organization conduct gaming activities with nonmembers?	Yes	No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	No
13	Indicate the percentage of gaming activity conducted in:		
	The organization's facility	13a	%
		13b	<u>%</u>
	An outside facility Enter the name and address of the person who prepares the organization's gaming/special events books and records:	130	70
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records.		
	Name		
	Address		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	🗌 No
h	If "Yes," enter the amount of gaming revenue received by the organization <b>&gt;</b> \$ and the amount		
D.	of gaming revenue retained by the third party ▶\$		
~	If "Yes," enter name and address of the third party:		
C	and res, enter name and address of the time party.		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation  \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
a		Ves	No No
h	retain the state gaming license?		
D	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
Pa	organization's own exempt activities during the tax year ► \$ <b>Supplemental Information.</b> Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part I.		h 10h
ľů		t III, III es 9, 9	b, TUD,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
_			
83204	33 10-03-18 Schedule G (Forn	n 990 or 990-	EZ) 2018
00200	34		,0 10

Schedule G	(Form 990 or 990-EZ) Supplemental Info	MUSKINGUM COUNT	Y COMMUNITY	FOUNDATION	31-1147022	Page 4
Part IV	Supplemental Info	rmation (continued)				
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				$\mathbf{O}$		
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			7			
				_		
				So	hedule G (Form 990 or	990-EZ)

832084 04-01-18

SCHEDULE I (Form 990)		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.	er Assistanc d Individuals <sup>answered "Yes"</sup>	te to Organi s in the Unit on Form 990, Parl	zations, ed States t IV, line 21 or 22.		OMB No. 1545-0047
Department of the Treasury Internal Revenue Service		Go to www.irs	<ul> <li>Attach to Form 990.</li> <li>Go to www.irs.gov/Form990 for the latest information.</li> </ul>	ר) 990. the latest inform	ătion.		Open to Public Inspection
fthe		COMMUNITY FOU	FOUNDATION				Employer identification number 31-1147022
Part I General Information	General Information on Grants and Assistance						
1 Does the organization mair	Does the organization maintain records to substantiate the amount of the		r assistance, the g	rantees' eligibility 1	for the grants or assis	grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
	grants or assistance?						X Yes No
Part II Crants and Other A	Describe in Part IV the organization's procedures for monitoring the use of grant tunds in the Onited States.	toring the use of grant the	Covernments	States. smolete if the orde		es" on Form 000 Dart	W line 21 for and
	ecipient that received more than \$5,000. Part II can be duplicated if additional space is needed	be duplicated if addition	nal space is neede	d.			
1 (a) Name and address of organization or government	rganization (b) EIN	(c) IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
EAST MUSKINGUM STUDENT ENDOWMENT	IDOWMENT	C)					
13505 JOHN GLENN SCHOOL RD	Ъ.		•				GENERAL SUPPORT & SUPPORT
NEW CONCORD, OH 43762			10,901.	0.			FOR EDUCATIONAL PROGRAM
EAST MUSKINGUM UMBRELLA BOOSTERS 13115 JOHN GLENN SCHOOL RD. NEW CONCORD, OH 43762	SOOSTERS ED.		14 050.	.0			SUPPORT FOR CHOIR, BAND, & GOLF
EASTSIDE COMMUNITY MINISTRY	CRY		P				
221 STILLWELL ST. PO BOX 965	965			5			GENERAL SUPPORT & SUPPORT
ZANESVILLE, OH 43702-0965	31-0952074		8,030.	0.			FOR THE HEATING FUND
FRANKLIN LOCAL SCHOOL DISTRICT	STRICT				C		COMMUNITY CONNECTORS
360 CEDAR ST. PO BOX 428 DUNCAN FALLS OH 43734	31-6400478	GOVT СОVT	24 838	c	Ċ		GRANT & \$242 GENERAL SUPPORT
GENESIS HEALTHCARE FOUNDATION 1135 MAPLE AVENUE	NOITA				27		
ZANESVILLE, OH 43701-9829	31-1629304	501C3	6,710.	0.			GENERAL SUPPORT
GENESIS HEALTHCARE SYSTEM							GENERAL SUPPORT & SUPPORT
2503 MAPLE AVE. STE A							FOR THE BREAST CARE
ZANESVILLE, OH 43701	31-1480941	501C3	38,258.	0.			CENTER
2 Enter total number of secti	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	ganizations listed in the	line 1 table				▶ 26.
3 Enter total number of other	Enter total number of other organizations listed in the line 1 table	1 table					▶ 26.
LHA For Paperwork Reductio	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	ions for Form 990.					Schedule I (Form 990) (2018)

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

832101 11-02-18

Schedule I (Form 990) MUSKINGUM	COUNTY	COMMUNITY FOU	FOUNDATION				31-1147022 Page 1
Part II Continuation of Grants and Other Assistance to Governments and	Assistance to Gov		<b>Organizations in the United States</b>		(Schedule I (Form 990), Part II.)	т II.)	
(a) Name and address of organization or government	( <b>b</b> ) EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
GRACE UNITED METHODIST CHURCH 516 SHINNICK STREET ZANESVILLE, OH 43701	31-4414086	501C3	.050.	.0			GENERAL SUPPORT
нц	31-4391224	50103	6,461.	.0			GENERAL SUPPORT
MUSKINGUM COUNTY LIBRARY SYSTEM 220 N. FIFTH STREET ZANESVILLE, OH 43701		501C3	8,892.	0.			GENERAL SUPPORT, "EMERGING TECHNOLOGY PROJECT", & COMMUNITY READ PROGRAM
MUSKINGUM FAMILY Y 1861 ADAMS LANE ZANESVILLE, OH 43701	31-1694045	501C3	.181.	•0			GENERAL SUPPORT
MUSKINGUM RECREATION CENTER 1425 NEWARK RD ZANESVILLE, OH 43701	27-3457993	501C3	20,000.	о. О.			GENERAL SUPPORT
MUSKINGUM UNIVERSITY 163 STORMONT NEW CONCORD, OH 43762	31-4379515	501C3	7,196.		C		GENERAL SUPPORT, THEATER CAMP, SUMMER HIGH SCHOOL MUSIC THEATER, & SCHOLARSHIPS
MVESC 205 NORTH SEVENTH STREET ZANESVILLE, OH 43701		501C3	59,245.	0.	100-		COMMUNITY CONNECTORS GRANT
OHIO UNIVERSITY-ZANESVILLE 1425 NEWARK RD. ZANESVILLE, OH 43701	31-6025986	501C3	6,571.	0.	<b>b</b>		GENERAL SUPPORT & SCHOLARSHIPS
PREVENT BLINDNESS OHIO 1500 W. THIRD AVENUE SUITE 200 COLUMBUS, OH 43212	31-6063433	501C3	6,171.	0.			TO SUPPORT RESEARCH TO FIND A CURE FOR (1) MACULAR DEGENERATION, WET & DRY, (2) GLAUCOMA, (3) Schedule   [Form 990)

Ð	COUNTY CO		FOUNDATION				31-1147022 Page 1
Part II Continuation of Grants and Other Assistance to Governments and	ssistance to Gov		<b>Organizations in the United States</b>		(Schedule I (Form 990), Part II.)	t II.)	
<b>(a)</b> Name and address of organization or government	(b) EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ST. ANN'S CATHOLIC CHURCH							
405 CHESTNUT ST.							
DRESDEN, OH 43821		501C3	5,000.	0.			GENERAL SUPPORT
TE UNIVERSITY							TO SUPPORT RESEARCH TO
TION - 66		<b>`</b>					
FLUOK KM 833 FU BUX 183112 - COLUMBUS, OH 43202		50103	22,789.	.0			& DRY, (2) GLAUCOMA, (3)
THE WILDS		·10.					
ERN	31-1113670		0 F.2F	c			שכטממודס, וגמשאשא שכטממודס, וגמשאשא
5		COTAC					TUCE TO A COLECULI
TRULIGHT MINISTRIES							FREE LEANSFORTALLON SERVICE FOR LOW/NO INCOME
807 PUTNAM AVENUE PO BOX 2602			C				RESIDENTS IN MUSKINGUM
ZANESVILLE, OH 43702-2602	81-1197202	501C3	5,000.	0.			COUNTY AND BREAKFAST WITH
UNITED WAY OF MUSK.,PERRY & MORGAN				6			
ZANESVILLE, OH 43701	31-4379456	501C3	18,431.	.0			
UNIVERSITY OF WISCONSIN FOUNDATION				<u>(</u>			TO SUPPORT RESEARCH TO FIND A CURE FOR (1)
PO BOX 78807				5			MACULAR DEGENERATION, WET
MILWAUKEE, WI 53278-0807	39-0743975	501C3	24,954.	0.	(		& DRY, (2) GLAUCOMA, (3)
VILLAGE OF DRESDEN 904 CHESTNUT STREET PO BOX 539				)	00		SUPPORT FOR THE SENIOR
DRESDEN, OH 43821		GOVT	16,800.	0.			CENTER
ZANE STATE COLLEGE							
1555 NEWARK ROAD ZANESVILLE, OH 43701	31-1106338	501C3	14,695.	.0			GENERAL SUPPORT & SCHOLARSHIPS
COLI K ROZ							
ZANESVILLE, OH 43701	31-1106338	501C3	10,781.	.0			GENERAL SUPPORT
							Schedule I (Form 990)

04-01-18

Schedule I (Form 990) (2018) MUSKINGUM COUNTY		COMMUNITY FOUNDATION	LON		31-1147022 Page 2
Part III         Grants and Other Assistance to Domestic Individuals.           Part III         can be duplicated if additional space is needed.	Complet	organization answe	te if the organization answered "Yes" on Form 990, Part IV, line 22.	90, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	<b>(c)</b> Amount of cash grant	(d) Amount of non- cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS AWARDED TO LOCAL AREA STUDENTS	187	186,700.	.0		
ARTIST AWARD AS SELECTED BY THE BUCCI/DIETZ SELECTION COMMITTEE	m	1,000.	.0		
	ill'				
		OI <sup>C</sup>			
		<u> </u>	Ċ		
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	quired in Part I, lin	e 2; Part III, column	(b); and any other ad	ditional information.	
PART I, LINE 2:			20		
MANY OF OUR COMPONENT FUNDS ARE SET	UP TO	AWARD FUNDS	ΤO	LOCAL DOCUMENTED	
CHARITABLE ORGANIZATIONS ON AN ANNUAL		BASIS. FOR COMF	COMPETITIVE GRANTS.	ANTS, THE	
GRANT-SEEKING ORGANIZATION PROVIDES	DOCI	UMENTATION AS	0T O	THEIR CHARITABLE	
STATUS AND/OR THE CHARITABLE NATURE	E OF THE	PROJECT. C	OUR DISTRIBUTION	UTION	
COMMITTEE MEETS, REVIEWS ALL APPLICATIONS RECEIVED,	CATIONS R		AND RECOMMENDS WHICH	NDS WHICH	
PROGRAMS TO FUND, AS WELL AS THE AN	AMOUNT OF	FUNDING TO	DROVIDE TO	) EACH	
RECIPIENT. A YEAR-END REPORT IS REG	REQUIRED FR	FROM EACH GR	GRANTEE TO DO	DOCUMENT	
PROPER USE OF THE FUNDS AWARDED. SO	SCHOLARSHI	P FUNDS FC	RSHIP FUNDS FOLLOW SIMILAR	AR	
832102 11-02-18					Schedule I (Form 990) (2018)

Schedule I			COUNTY	COMMUNITY	FOUNDATION	31-1147022	Page <b>2</b>
Part IV	Suppler	mental Information					

PROCEDURES, USING THE APPROPRIATE SELECTION COMMITTEE.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: PREVENT BLINDNESS OHIO

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT RESEARCH TO FIND A CURE

FOR (1) MACULAR DEGENERATION, WET & DRY, (2) GLAUCOMA, (3) ANY ADDITIONAL

CAUSES OF BLINDNESS INCLUDING CATARACTS, VARIOUS CANCERS, DIABETIC EYE

DISEASE, ETC.

NAME OF ORGANIZATION OR GOVERNMENT: THE OHIO STATE UNIVERSITY FOUNDATION (H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT RESEARCH TO FIND A CURE FOR (1) MACULAR DEGENERATION, WET & DRY, (2) GLAUCOMA, (3) ANY ADDITIONAL CAUSES OF BLINDNESS INCLUDING CATARACTS, VARIOUS CANCERS, DIABETIC EYE DISEASE, ETC. & \$250 FOR PELOTONIA

NAME OF ORGANIZATION OR GOVERNMENT: TRULIGHT MINISTRIES
(H) PURPOSE OF GRANT OR ASSISTANCE: FREE TRANSPORTATION SERVICE FOR
LOW/NO INCOME RESIDENTS IN MUSKINGUM COUNTY AND BREAKFAST WITH BILLY

NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF WISCONSIN FOUNDATION (H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT RESEARCH TO FIND A CURE FOR (1) MACULAR DEGENERATION, WET & DRY, (2) GLAUCOMA, (3) ANY ADDITIONAL CAUSES OF BLINDNESS INCLUDING CATARACTS, VARIOUS CANCERS, DIABETIC EYE DISEASE, ETC.

Schedule I (Form 990)

832291 04-01-18

SCHEDULE	Μ
(Form 990)	

# **Noncash Contributions**

OMB No. 1545-0047

ſ **/**U 18

Department of the Treasury
Internal Revenue Service

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

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

Inspection Employer identification number

**Open to Public** 

Name of the organization	n
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MUSKINGUM COUNTY COMMUNITY FOUNDATION

	MUSKINGUM CO	UNTY C	OMMUNITY H	FOUNDATION	31	-1147	022	
Pa	t I Types of Property							
		<b>(a)</b> Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o noncash con	<b>(d)</b> of determin tribution ar		6
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	7	157,337.	MARKET QU	OTED I	PRIC	CES
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or				•			
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -			0.				
	Historic structures			30				
14	Qualified conservation contribution - Other $\dots$							
15	Real estate - Residential			<b>V</b>				
16	Real estate - Commercial			2				
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		1.0.5	04.074				
25	Other ( <u>AUCTION ITEMS</u> )	x	127	21,376.	SALES PRO	CEEDS		
26	Other ► ()							
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organiz							
	for which the organization completed Form 828	83, Part IV, [	Donee Acknowledg	jement 29				
							Yes	No
30a	During the year, did the organization receive by							
	must hold for at least three years from the date							v
	exempt purposes for the entire holding period?	·				<u>30a</u>		<u>x</u>
	If "Yes," describe the arrangement in Part II.		auticas the manifest	f on a nonotonal and a set of the	0000		v	
31	Does the organization have a gift acceptance p				UNS?	31	X	
32a	Does the organization hire or use third parties		-					х
Ŀ						<u>32a</u>		_
	If "Yes," describe in Part II. If the organization didn't report an amount in c	olumn (a) fai	a tuno of property	for which column (a) is share	kod			
33		olumni (C) foi	a type of property	nor which column (a) is chec	NEU,			
	describe in Part II.							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2018

Schedule M	(Form 990) 2018	MUSKINGUM	COUNTY	COMMUNITY	FOUNDATION	31-1147022	Page <b>2</b>
Part II	Supplemental	I Information. P	rovide the info umber of cont	ormation required by	Part I, lines 30b, 32b, and	33, and whether the organiza ombination of both. Also com	tion
						3	
					$\mathcal{O}$		
					.0		
				S			
			•	<u> </u>			
			$\sim$				
		$\sim$					
832142 10-18-1	8					Schedule M (Form	990) 2018
				4.0			

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization 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 990-EZ.

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

MUSKINGUM COUNTY COMMUNITY FOUNDATION



Employer identification number 31 - 1147022

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

ADMINISTERING CHARITABLE FUNDS.

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

PHILANTHROPY.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

VARIOUS OTHER ACTIVITIES AND PROGRAMS THAT PROVIDE COMMUNITY SUPPORT

AND ASSISTANCE, WITH NUMEROUS MEMBERS OF THE COMMUNITY BENEFITING.

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

A DRAFT COPY OF THE 990 IS PROVIDED TO ALL MEMBERS OF THE FINANCE AND ADMINISTRATION COMMITTEES, WHO MEET TO DISCUSS AND REVIEW THE DRAFT AND MAKES ANY NECESSARY CHANGES. UPON COMMITTEE APPROVALS, THE DRAFT IS MADE AVAILABLE TO THE ENTIRE BOARD OF DIRECTORS TO REVIEW AND APPROVE PRIOR TO

ITS FILING.

FORM 990, PART VI, SECTION B, LINE 12C: CONFLICT OF INTEREST STATEMENTS, COMPLETED BY EACH BOARD MEMBER, ARE REVIEWED ANNUALLY. IF A CONFLICT IS NOTED, THE BOARD PRESIDENT, VICE PRESIDENT, AND EXECUTIVE DIRECTOR MEET TO AGREE UPON A PLAN OF ACTION.

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

THE EXECUTIVE COMMITTEE MEETS ANNUALLY TO SET SALARIES FOR THE UPCOMING

YEAR. SALARIES ARE SET USING SALARY HISTORIES, PERFORMANCE REVIEWS.

 COMMITTEE
 RECOMMENDATIONS
 ARE
 THEN
 TAKEN
 TO
 THE
 FULL
 BOARD
 OF
 DIRECTORS
 FOR

 LHA
 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990 or 990-EZ) (2018)

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 10-10-18
 Schedule O (Form 990 or 990-EZ)
 Schedule O (Form 990 or 990-EZ) (2018)

Schedule O (Form 990 or 990-EZ) (2018)	Page <b>2</b>
Name of the organization MUSKINGUM COUNTY COMMUNITY FOUNDATION	Employer identification number 31-1147022
THEIR APPROVAL.	
FORM 990, PART VI, SECTION C, LINE 18:	
FORMS 990 ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE, AS	WELL AS
WWW.GUIDESTAR.ORG. FORMS 990 AND 1023 ARE AVAILABLE UPON R	EOUEST.
FORM 990, PART VI, SECTION C, LINE 19:	
GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICIES ARE	MADE AVAILABLE
UPON REQUEST. AUDITED FINANCIAL STATEMENTS ARE PROVIDED O	N THE
ORGANIZATION'S WEBSITE.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
INCREASE IN CASH SURRENDER VALUE - LIFE INSURANCE	21,400.
CHANGE IN VALUE OF TRUST AGREEMENTS	676.
INKIND RENT ELIMINATED	-60,000.
TOTAL TO FORM 990, PART XI, LINE 9	-37,924.
• ()	
FORM 990, PART XII, LINE 2C:	
THERE HAS BEEN NO CHANGE IN THIS PROCESS SINCE THE PREVIOU	S YEAR.

SCHEDULE R (Form 990)	Comp	Related Organizations and Unrelated Partnerships ► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.	anizations and Unrelated Partnerships tion answered "Yes" on Form 990, Part IV, line 33, 34, 35b, Attach to Form 990.	<b>tnerships</b> <sub>1</sub> e 33, 34, 35b, 36	), or 37.		OMB No. 1545-0047 <b>2018</b> Open to Public
Internal Revenue Service Name of the organization		<u>Go to www.irs.gov/l</u>	r instructions and the lates	t information.		Employer iden	Inspection Employer identification number
	MUSKINGUM COUNTY	TY COMMUNITY FOUNDATION	VTION			31-1147022	7022
Part I Identificatio	Identification of Disregarded Entities. Complet	Complete if the organization answered "Yes" on Form 990, Part IV, line 33	on Form 990, Part IV, line 33				
	(a)	(q)	(c)	(p)	(e)		(f)
Name, addr	Name, address, and EIN (if applicable)	Primary activity	Legal domicile (state or	Total income	ne End-of-year assets		Direct controlling
of	of disregarded entity	$\langle$	foreign country)				entity
MCCF LIMITED - 32-	32-0042157	CHARITABLE - TO HOLD					
534 PUTNAM AVENUE		DONATED REAL ESTATE				MUSKINGUM COUNTY	COUNTY
ZANESVILLE, OH 43	43701		ОІНО			COMMUNITY	FOUNDATION
MCCF II LLC - 30-(	30-0283871	СНАКІТАВЬЕ - ТО НОЬD					
534 PUTNAM AVENUE		DONATED REAL ESTATE				MUSKINGUM COUNTY	COUNTY
H	43701	RECEIVED BY THE FOUNDATION	ОІНО			COMMUNITY	FOUNDATION
MCCF III LLC - 45-	45-2460500	СНАКІТАВЬЕ – ТО НОЬР					
534 PUTNAM AVENUE		DONATED REAL ESTATE				MUSKINGUM COUNTY	COUNTY
ZANESVILLE, OH 43	43701	RECEIVED BY THE FOUNDATION	онго			COMMUNITY	COMMUNITY FOUNDATION
WOODEN BUILDING LTD	rD	СНАКІТАВЬЕ – ТО НОЬD					
534 PUTNAM AVENUE		DONATED REAL ESTATE				MUSKINGUM COUNTY	COUNTY
ZANESVILLE, OH 43	43701	RECEIVED BY THE FOUNDATION	онго			COMMUNITY	COMMUNITY FOUNDATION
Part II organization	Identification of Related Tax-Exempt Organiza organizations during the tax year.	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.	nswered "Yes" on Form 990,	Part IV, line 34, b	ecause it had one o	or more related tax-∈	xempt
	(a)	(q)	(c)	(q)	(ə)	(J)	(g)
Nam	Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	controlled
ofn	of related organization		foreign country)	section	status (if section 501(c)(3))	entity	entity? Yes No
				(			_
				5			
				5			
				1			
				)			
For Paperwork Reduc	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	s for Form 990.				Schedule	Schedule R (Form 990) 2018

3 (Form 990) 2018 MUSKINGUM COUNTY COMMUNITY FOUNDATION 31 – 1147022 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.	(a)     (b)     (c)     (d)     (d)     (e)     (f)     (g)     (h)     (i)     (j)     (j)     (k)       ddress, and EIN     Primary activity     Legal domicale (state or coreign     Direct controlling     Predominant income (related, unrelated, income     Rare of total     Share of total     Share of allocations?     Code V-UBI     General or locations?     Percentage       ed organization     (state or coreign     (related, unrelated, income     income     Share of total     Share of allocations?     20 of Schedule     Percentage       end-organization     assets     vestions 512-514)     vestions 512-514)     vestions 512-514)     vestions 512-514)     vestions 512     vestions 512		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)     (b)     (c)     (d)     (e)     (f)     (g)     (h)     (j)       Name, address, and EIN     Primary activity     Legal domicile     Direct controlling     Type of entity     Share of total     Share of condition     Section       of related organization     entity     corp, S corp, or trust)     or trust)     or trust)     or trust)     Section     Section				iffication of Related Or izations treated as a co (a) Name, address, and E of related organizatio
Schedule R (Form 990) 2018 MUSI Part III Identification of Related O	<b>(a)</b> Name, address, and EIN of related organization			(a) Name, address, and of related organizati				Part IV Identification of Related O. organizations treated as a constructed as a construct of the second of related organizations for the second of related organizations for the second of the second

FOUNDATION
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Form 990
ule R (I

Schedule R (Form 990) 2018 MUSKINGUM COUNTY COMMUNITY F(	ITY FOUNDATION		31-11	-1147022	۵.	Page 3
<b>3elated Organizations.</b> Complete if the orgar	wered "Yes" on Form	iization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36	r 36.			
Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Í	Yes	Ŷ
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more rel	lated organizations listed in	Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	/			<b>1</b> a		
<b>b</b> Gift, grant, or capital contribution to related organization(s)				1b		
<b>c</b> Gift, grant, or capital contribution from related organization(s)				1c		
<b>d</b> Loans or loan guarantees to or for related organization(s)				1d		
				1e		
f Dividends from related organization(s)				¥		
g Sale of assets to related organization(s)				1g		
				ŧ		
				÷		
o related organization(s)				÷		
	•					
k Lease of facilities, equipment, or other assets from related organization(s)				¥	Γ	]
	nization(s)			=		
m Performance of services or membership or fundraising solicitations by related organization(s)	nization(s)			<u>1</u>		
n Sharing of facilities. equipment, mailing lists, or other assets with related organization(s)	on(s)			÷		
	C			ę		
	5					
p Reimbursement paid to related organization(s) for expenses	C			1p		
				1q		
r Other transfer of cash or property to related organization(s)	<b>,</b>			†		
s Other transfer of cash or property from related organization(s)		2		-1s		
If the answer to any of the above is "Yes," see the instructions for inform	ho must complete thi	is line, including covered rela	lation on who must complete this line, including covered relationships and transaction thresholds.	-		
(a) Name of related orognization	(b) Transaction	(c)	(d) Method of determining amount involved	pentova		
	type (a-s)					
		2				
		3				
(2)						
ξ						
(3)						
(4)						
(6)						
832163 10-02-18			Schedu	Schedule R (Form 990) 2018	066	2018

Schedule R	(Form 990) 2018	MUSKINGUM	COUNTY	COMMUNITY	FOUNDATION	31-1147022 Page 5
Part VII	(Form 990) 2018 Supplemental Info	ormation.				
	Provide additional infor	mation for responses to	o questions or	Schedule R. See in	structions.	
					_( )	
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				<u>,</u>		
			-5			
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		NO '				
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165 10-02-1	8			10		Schedule R (Form 990) 2018

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