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.
- Information about Form 990 and its instructions is at www.irs.gov/form990.

A  For the 2015 calendar year, or tax year beginning 7/01, 2015, and ending 6/30 2016

B  Check if applicable:
- Address change
- Name change
- Initial return
- Final return/terminated
- Amended return
- Application pending

C  COMMUNITY FOUNDATION OF CENTRAL GA, INC.
577 NULBERY STREET #1600
MACON, GA 31201

D  Employer identification number
58-2053465

E  Telephone number
478-750-9338

F  Name and address of principal officer: KATHRYN H DENNIS
SAME AS C ABOVE

G  Gross receipts $ 20,173,364

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No

I  Tax-exempt status
X 501(c)(3)
501(c) ( ) (insert no.) 4947(a)(1) or 527

J  Website: WWW.CFCGA.ORG

K  Form of organization
X Corporation

L  Year of formation: 1993

M  State of legal domicile: GA

Part I Summary

1 Briefly describe the organization's mission or most significant activities: TO ENHANCE THE QUALITY OF LIFE FOR THE PEOPLE OF CENTRAL GEORGIA.

2 Check this box [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a) 3

4 Number of independent voting members of the governing body (Part VI, line 1b) 4

5 Total number of individuals employed in calendar year 2015 (Part V, line 2a) 5

6 Total number of volunteers (estimate if necessary) 6

7a Total unrelated business revenue from Part VIII, column (C), line 12 $0

7b Net unrelated business taxable income from Form 990-T, line 34 $0

8 Contributions and grants (Part VIII, line 1h) $8,553,735 $6,667,443

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue = add lines 8 through 11 (must equal Part VIII, column (A), line 12) $13,377,638 $10,518,575

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) $6,166,301 $5,255,468

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25) $290,576

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24a)

18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) $7,672,930 $6,727,736

19 Revenue less expenses. Subtract line 18 from line 12 $5,704,708 $3,790,839

20 Total assets (Part X, line 16) $106,106,157 $106,372,240

21 Total liabilities (Part X, line 26) $24,407,766 $24,446,216

22 Net assets or fund balances. Subtract line 21 from line 20 $81,698,391 $81,926,024

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer other than officer is based on all information of which preparer has any knowledge.

Sign Here

KATHRYN H. DENNIS
PRESIDENT

Type or print name and title.

Paid Preparer Use Only

JAMES H. WANSLEY
12/05/16

Firm's name BUTLER WILLIAMS & WYCHE, LLP

Firm's address 915 HILL PARK
MACON, GA 31201

Firm's EIN 58-0653763
Phone no. (478) 742-3676

May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No

BAA For Paperwork Reduction Act Notice, see the separate instructions. 10/01/15

Form 990 (2015)
**Part III Statement of Program Service Accomplishments**

1. Briefly describe the organization's mission:
   
   **TO ENHANCE THE QUALITY OF LIFE FOR THE PEOPLE OF CENTRAL GEORGIA.**

2. Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  
   Yes [ ] No [x]  
   If ‘Yes,’ describe these new services on Schedule O.

3. Did the organization cease conducting, or make significant changes in how it conducts, any program services?  
   Yes [ ] No [x]  
   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 $5,566,125, including grants of $5,255,468) (Revenue $ )  
   WE ARE A COMMUNITY FOUNDATION, OFFERING OUR DONORS THE OPPORTUNITY TO CREATE A LASTING LEGACY BY ESTABLISHING THEIR OWN CHARITABLE FUNDS AND TO SUPPORT THE CAUSES IN WHICH THEY BELIEVE. OUR ASSETS ARE ADMINISTERED EXCLUSIVELY FOR CHARITABLE PURPOSES, PRIMARILY FOR THE BENEFIT OF THE TWENTY-ONE COUNTIES COMPRISING THE CENTRAL GEORGIA REGION. WE SUPPORT AREA NON-PROFITS THROUGH OUR COMMUNITY GRANT PROGRAM AND AREA STUDENTS THROUGH OUR SCHOLARSHIP PROGRAMS.

   **4b** (Code: ) (Expenses $, including grants of $ ) (Revenue $ )  

   **4c** (Code: ) (Expenses $, including grants of $ ) (Revenue $ )  

   **4d** Other program services. (Describe in Schedule O.)  
   (Expenses $ including grants of $ ) (Revenue $ )

   **4e** Total program service expenses  
   $5,566,125.
### Part IV Checklist of Required Schedules

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>2</td>
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<td>X</td>
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<td>11</td>
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<td>12a</td>
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<td>13</td>
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<td>X</td>
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<td>14a</td>
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<td>18</td>
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<td>X</td>
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<tr>
<td>19</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b</td>
<td>Did the organization operate one or more hospital facilities? If 'Yes', complete Schedule H.</td>
<td>20a</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>b</td>
<td>If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?</td>
<td>20b</td>
</tr>
<tr>
<td>21</td>
<td>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.</td>
<td>21</td>
</tr>
<tr>
<td>22</td>
<td>Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III.</td>
<td>22</td>
</tr>
<tr>
<td>23</td>
<td>Did the organization answer 'Yes' to Part VIII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J.</td>
<td>23</td>
</tr>
<tr>
<td>24a</td>
<td>Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25a.</td>
<td>24a</td>
</tr>
<tr>
<td>b</td>
<td>Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?</td>
<td>24b</td>
</tr>
<tr>
<td>c</td>
<td>Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?</td>
<td>24c</td>
</tr>
<tr>
<td>d</td>
<td>Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?</td>
<td>24d</td>
</tr>
<tr>
<td>25a</td>
<td>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I.</td>
<td>25a</td>
</tr>
<tr>
<td>b</td>
<td>Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part II.</td>
<td>25b</td>
</tr>
<tr>
<td>26</td>
<td>Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II.</td>
<td>26</td>
</tr>
<tr>
<td>27</td>
<td>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.</td>
<td>27</td>
</tr>
<tr>
<td>28</td>
<td>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):</td>
<td>28</td>
</tr>
<tr>
<td>a</td>
<td>A current or former officer, director, or key employee? If 'Yes,' complete Schedule L, Part IV.</td>
<td>28a</td>
</tr>
<tr>
<td>b</td>
<td>A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.</td>
<td>28b</td>
</tr>
<tr>
<td>c</td>
<td>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.</td>
<td>28c</td>
</tr>
<tr>
<td>29</td>
<td>Did the organization receive more than $25,000 in non-cash contributions? If 'Yes,' complete Schedule M.</td>
<td>29</td>
</tr>
<tr>
<td>30</td>
<td>Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M.</td>
<td>30</td>
</tr>
<tr>
<td>31</td>
<td>Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I.</td>
<td>31</td>
</tr>
<tr>
<td>32</td>
<td>Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.</td>
<td>32</td>
</tr>
<tr>
<td>33</td>
<td>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.</td>
<td>33</td>
</tr>
<tr>
<td>34</td>
<td>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.</td>
<td>34</td>
</tr>
<tr>
<td>35a</td>
<td>Did the organization have a controlled entity within the meaning of section 512(b)(13)?</td>
<td>35a</td>
</tr>
<tr>
<td>b</td>
<td>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.</td>
<td>35b</td>
</tr>
<tr>
<td>36</td>
<td>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.</td>
<td>36</td>
</tr>
<tr>
<td>37</td>
<td>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.</td>
<td>37</td>
</tr>
<tr>
<td>38</td>
<td>Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?</td>
<td>38</td>
</tr>
</tbody>
</table>

**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**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td>Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b</td>
<td>Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>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</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>Did the organization have unrelated business gross income of $1,000 or more during the year?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3b</td>
<td>If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4a</td>
<td>Did a donor advised fund maintained by the sponsoring 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)?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4b</td>
<td>If 'Yes,' enter the name of the foreign country</td>
<td></td>
<td></td>
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<tr>
<td>5a</td>
<td>Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5b</td>
<td>Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5c</td>
<td>If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6a</td>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6b</td>
<td>If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a</td>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b</td>
<td>If 'Yes,' did the organization notify the donor of the value of the goods or services provided?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7c</td>
<td>Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7d</td>
<td>If 'Yes,' indicate the number of Forms 8282 filed during the year</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7e</td>
<td>Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7f</td>
<td>Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</td>
<td></td>
<td></td>
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<tr>
<td>7g</td>
<td>If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7h</td>
<td>If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9a</td>
<td>Did the sponsoring organization make any taxable distributions under section 4966?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9b</td>
<td>Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a</td>
<td>Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b</td>
<td>Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11a</td>
<td>Gross income from members or shareholders</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11b</td>
<td>Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12a</td>
<td>Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12b</td>
<td>If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13a</td>
<td>Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13b</td>
<td>Enter the number of reserves on hand</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14a</td>
<td>Did the organization receive any payments for indoor tanning services during the tax year?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14b</td>
<td>If 'Yes,' has it filed a Form 720 to report these payments?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### 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.

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

**Section A. Governing Body and Management**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 a</td>
<td>Enter the number of voting members of the governing body at the end of the tax year.</td>
<td>27</td>
<td></td>
</tr>
<tr>
<td>1 a</td>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 b</td>
<td>Enter the number of voting members included in line 1a, above, who are independent</td>
<td>26</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>3</td>
<td>Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>4</td>
<td>Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>5</td>
<td>Did the organization become aware during the year of a significant diversion of the organization’s assets?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>6</td>
<td>Did the organization have members or stockholders?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>7 a</td>
<td>Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>7 b</td>
<td>Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>8 a</td>
<td>Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>8 b</td>
<td>The governing body?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>8 b</td>
<td>Each committee with authority to act on behalf of the governing body?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>9</td>
<td>Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization’s mailing address? If ‘Yes,’ provide the names and addresses in Schedule O.</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

**Section B. Policies**

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

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 a</td>
<td>Did the organization have local chapters, branches, or affiliates?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>10 b</td>
<td>If ‘Yes,’ did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization’s exempt purposes?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>11 a</td>
<td>Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>11 b</td>
<td>Describe in Schedule O the process, if any, used by the organization to review this Form 990.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 a</td>
<td>Did the organization have a written conflict of interest policy?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>12 b</td>
<td>Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>12 c</td>
<td>Did the organization regularly and consistently monitor and enforce compliance with the policy?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>13</td>
<td>Did the organization have a written whistleblower policy?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>14</td>
<td>Did the organization have a written document retention and destruction policy?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>15 a</td>
<td>Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>15 b</td>
<td>If ‘Yes,’ line 15a or 15b, describe the process in Schedule O (see instructions).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 a</td>
<td>Did the organization have members or stockholders?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>16 b</td>
<td>If ‘Yes,’ did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization’s exempt status with respect to such arrangements?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Section C. Disclosure**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>17</td>
<td>List the states with which a copy of this Form 990 is required to be filed</td>
<td>NONE</td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>State the name, address, and telephone number of the person who possesses the organization’s books and records:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**HAZLE HAMILTON 577 MULBERRY STREET STE 1600 MACON GA 31201 478-750-9338**
### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

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

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Average hours per week</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) MARK BYRD</td>
<td></td>
<td>2</td>
<td>0. X</td>
<td>0. 0</td>
<td>0.</td>
</tr>
<tr>
<td>(2) JULIA G BALDWIN</td>
<td></td>
<td>1</td>
<td>0. X</td>
<td>0. 0</td>
<td>0.</td>
</tr>
<tr>
<td>(3) MALCOLM S BURGESS, JR</td>
<td></td>
<td>2</td>
<td>0. X</td>
<td>0. 0</td>
<td>0.</td>
</tr>
<tr>
<td>(4) ROBERT F HATCHER, JR</td>
<td></td>
<td>1</td>
<td>0. X</td>
<td>0. 0</td>
<td>0.</td>
</tr>
<tr>
<td>(5) VIRGIL ADAMS</td>
<td></td>
<td>1</td>
<td>0. X</td>
<td>0. 0</td>
<td>0.</td>
</tr>
<tr>
<td>(6) DAVE CARTY</td>
<td></td>
<td>1</td>
<td>0. X</td>
<td>0. 0</td>
<td>0.</td>
</tr>
<tr>
<td>(7) RONNIE D ROLLINS</td>
<td>TREAURER</td>
<td>2</td>
<td>0. X</td>
<td>0. 0</td>
<td>0.</td>
</tr>
<tr>
<td>(8) JACQUELINE G SCOTT</td>
<td>SECRETARY</td>
<td>0.5</td>
<td>0. X</td>
<td>0. 0</td>
<td>0.</td>
</tr>
<tr>
<td>(9) STEVE L KRUGER</td>
<td></td>
<td>1</td>
<td>0. X</td>
<td>0. 0</td>
<td>0.</td>
</tr>
<tr>
<td>(10) EUGENE M MADUXX</td>
<td></td>
<td>0.5</td>
<td>0. X</td>
<td>0. 0</td>
<td>0.</td>
</tr>
<tr>
<td>(11) ELEANOR A LANE</td>
<td></td>
<td>1</td>
<td>0. X</td>
<td>0. 0</td>
<td>0.</td>
</tr>
<tr>
<td>(12) RUTH A KNOX</td>
<td></td>
<td>1</td>
<td>0. X</td>
<td>0. 0</td>
<td>0.</td>
</tr>
<tr>
<td>(13) CAMILLE HOPE</td>
<td></td>
<td>0.5</td>
<td>0. X</td>
<td>0. 0</td>
<td>0.</td>
</tr>
<tr>
<td>(14) JEFF MANLEY</td>
<td></td>
<td>2</td>
<td>0. X</td>
<td>0. 0</td>
<td>0.</td>
</tr>
</tbody>
</table>
## Part VII  Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(B) (C) (D) (E) (F)

<table>
<thead>
<tr>
<th>Position</th>
<th>Average hours per week (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(A) Name and title</td>
<td>(B)</td>
<td>(C)</td>
<td>(D)</td>
<td>(E)</td>
</tr>
</tbody>
</table>

- **KATHY O’NEAL**
  - BOARD MEMBER
  - 2
  - 0

- **TERRY L PARKER**
  - BOARD MEMBER
  - 1
  - 0

- **NEAL L TALTON**
  - BOARD MEMBER
  - 1
  - 0

- **THERESA L ROBINSON**
  - BOARD MEMBER
  - 1
  - 0

- **TJENNA FLETCHER**
  - BOARD MEMBER
  - 2
  - 0

- **JAMES A MANLEY, III**
  - BOARD MEMBER
  - 1
  - 0

- **CHRIS R SHERIDAN, JR**
  - BOARD MEMBER
  - 2
  - 0

- **G BOONE SMITH, III**
  - BOARD CHAIR
  - 1
  - 0

- **SCOTT W SPIVEY**
  - BOARD MEMBER
  - 2
  - 0

- **KATHRYN H DENNIS**
  - PRES & BD MEMB
  - 40
  - 0

- **CHARLOTTE B BOGLE**
  - BOARD MEMBER
  - 2
  - 0

1. **Sub-total**: 266,207. 0. 41,053.
2. **Total from continuation sheets to Part VII, Section A**: 0. 0. 0.
3. **Total (add lines 1b and 1c)**: 266,207. 0. 41,053.

### Section B. Independent Contractors

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

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
</table>

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.
<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Position (check all that apply)</th>
<th>(C) Average hours per week (list any hours for related organizations below dotted line)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>TERRY A HENDERSON</td>
<td>BOARD MEMBER</td>
<td>1</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>JOHN D HOUSER</td>
<td>BOARD MEMBER</td>
<td>1</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>HARRIET W HAMILTON</td>
<td>EXEC VICE PRES</td>
<td>40</td>
<td>111,953.</td>
<td>0.</td>
<td>19,160.</td>
</tr>
<tr>
<td>Contributions, Gifts, Grants and Other Similar Amounts</td>
<td>(A) Total revenue</td>
<td>(B) Related or exempt function revenue</td>
<td>(C) Unrelated business revenue</td>
<td>(D) Revenue excluded from tax under sections 512-514</td>
<td></td>
</tr>
<tr>
<td>------------------------------------------------------</td>
<td>------------------</td>
<td>--------------------------------------</td>
<td>-------------------------------</td>
<td>--------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>1a Federated campaigns</td>
<td>1a</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Membership dues</td>
<td>1b</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Fundraising events</td>
<td>1c</td>
<td>1,030.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Related organizations</td>
<td>1d</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Government grants (contributions)</td>
<td>1e</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f All other contributions, gifts, grants, and similar amounts not included above</td>
<td>1f</td>
<td>6,667,413.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Noncash contributions included in lines 1a-1f</td>
<td></td>
<td></td>
<td>$2,410,620.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Total. Add lines 1a-1f</td>
<td></td>
<td></td>
<td>6,667,443.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2a NONE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f All other program service revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Total. Add lines 2a-2f</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Investment income (including dividends, interest and other similar amounts)</td>
<td></td>
<td>2,585,413.</td>
<td>2,585,413.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Income from investment of tax-exempt bond proceeds.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Royalties</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6a Gross rents</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less: rental expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Rental income or (loss)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Net rental income or (loss)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Gross amount from sales of assets other than inventory</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less: cost or other basis and sales expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Gain or (loss)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Net gain or (loss)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8a Gross income from fundraising events (not including $1,030. of contributions reported on line 1c).</td>
<td></td>
<td></td>
<td>1,265,925.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>See Part IV, line 18</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less: direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Net income or (loss) from fundraising events</td>
<td></td>
<td></td>
<td>-206.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9a Gross income from gaming activities.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>See Part IV, line 19</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less: direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Net income or (loss) from gaming activities</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross sales of inventory, less returns and allowances</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less: cost of goods sold</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Net income or (loss) from sales of inventory</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11a Miscellaneous Revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d All other revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Total. Add lines 11a-11d</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Total revenue. See instructions</td>
<td></td>
<td></td>
<td>10,518,575.</td>
<td>0.0. 3,851,132.</td>
<td></td>
</tr>
</tbody>
</table>
### Part IX: Statement of Functional Expenses

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

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

<table>
<thead>
<tr>
<th>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</th>
<th>(A) Total expenses</th>
<th>(B) Program service expenses</th>
<th>(C) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21</td>
<td>5,132,083</td>
<td>5,132,083</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Grants and other assistance to domestic individuals. See Part IV, line 22</td>
<td>123,385</td>
<td>123,385</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Benefits paid to or for members</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Compensation of current officers, directors, trustees, and key employees</td>
<td>280,000</td>
<td>68,250</td>
<td>123,550</td>
<td>88,200</td>
</tr>
<tr>
<td>6 Compensation not included above, to disqualified persons (as defined under section 4958(c)(3)(B))</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Other salaries and wages</td>
<td>176,678</td>
<td>96,921</td>
<td>52,918</td>
<td>26,839</td>
</tr>
<tr>
<td>8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td>36,621</td>
<td>13,245</td>
<td>14,151</td>
<td>9,225</td>
</tr>
<tr>
<td>9 Other employee benefits</td>
<td>23,110</td>
<td>9,938</td>
<td>9,012</td>
<td>4,160</td>
</tr>
<tr>
<td>10 Payroll taxes</td>
<td>31,659</td>
<td>11,450</td>
<td>12,234</td>
<td>7,975</td>
</tr>
<tr>
<td>11 Fees for services (non-employees):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Management</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Legal</td>
<td>5,661</td>
<td>2,434</td>
<td>2,208</td>
<td>1,019</td>
</tr>
<tr>
<td>c Accounting</td>
<td>23,608</td>
<td>10,152</td>
<td>9,207</td>
<td>4,249</td>
</tr>
<tr>
<td>d Lobbying</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Professional fundraising services. See Part IV, line 17</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Investment management fees</td>
<td>562,852</td>
<td>562,852</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)</td>
<td>875</td>
<td>376</td>
<td>341</td>
<td>158</td>
</tr>
<tr>
<td>12 Advertising and promotion.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Office expenses</td>
<td>16,824</td>
<td>7,234</td>
<td>6,562</td>
<td>3,028</td>
</tr>
<tr>
<td>14 Information technology</td>
<td>46,553</td>
<td>20,018</td>
<td>18,156</td>
<td>8,379</td>
</tr>
<tr>
<td>15 Royalties</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 Occupancy</td>
<td>42,060</td>
<td>18,086</td>
<td>16,403</td>
<td>7,571</td>
</tr>
<tr>
<td>17 Travel</td>
<td>23,877</td>
<td>10,267</td>
<td>9,312</td>
<td>4,298</td>
</tr>
<tr>
<td>18 Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19 Conferences, conventions, and meetings</td>
<td>14,025</td>
<td>6,031</td>
<td>5,470</td>
<td>2,524</td>
</tr>
<tr>
<td>20 Interest</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21 Payments to affiliates</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22 Depreciation, depletion, and amortization</td>
<td>3,784</td>
<td>1,627</td>
<td>1,476</td>
<td>681</td>
</tr>
<tr>
<td>23 Insurance</td>
<td>11,568</td>
<td>587</td>
<td>10,573</td>
<td>408</td>
</tr>
<tr>
<td>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 O.).</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a COMMUNICATIONS</td>
<td>77,048</td>
<td>17,620</td>
<td></td>
<td>59,428</td>
</tr>
<tr>
<td>b DONOR DEVELOPMENT</td>
<td>54,253</td>
<td></td>
<td></td>
<td>54,253</td>
</tr>
<tr>
<td>c DUES &amp; PUBLICATIONS</td>
<td>26,870</td>
<td>11,554</td>
<td>10,479</td>
<td>4,837</td>
</tr>
<tr>
<td>d TELEPHONE</td>
<td>7,297</td>
<td>3,138</td>
<td>2,846</td>
<td>1,313</td>
</tr>
<tr>
<td>e All other expenses</td>
<td>7,045</td>
<td>1,729</td>
<td>3,285</td>
<td>2,031</td>
</tr>
<tr>
<td>25 Total functional expenses. Add lines 1 through 24e</td>
<td>6,727,736</td>
<td>5,566,125</td>
<td>871,035</td>
<td>290,576</td>
</tr>
</tbody>
</table>

**Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Check here □ if following SOP 98-2 (ASC 958-720).
### Part X | Balance Sheet

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

<table>
<thead>
<tr>
<th></th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Cash – non-interest-bearing</td>
<td>37,442</td>
</tr>
<tr>
<td>2</td>
<td>Savings and temporary cash investments</td>
<td>3,826,973</td>
</tr>
<tr>
<td>3</td>
<td>Pledges and grants receivable, net</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Accounts receivable, net</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>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 employee beneficiary organizations (see instructions). Complete Part II of Schedule L</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Notes and loans receivable, net</td>
<td>73,500</td>
</tr>
<tr>
<td>8</td>
<td>Inventories for sale or use</td>
<td>8</td>
</tr>
<tr>
<td>9</td>
<td>Prepaid expenses and deferred charges</td>
<td>22,796</td>
</tr>
<tr>
<td>10a</td>
<td>Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td>230,906</td>
</tr>
<tr>
<td>10b</td>
<td>Less: accumulated depreciation</td>
<td>223,832</td>
</tr>
<tr>
<td>10c</td>
<td></td>
<td>7,074</td>
</tr>
<tr>
<td>11</td>
<td>Investments – publicly traded securities</td>
<td>74,543,623</td>
</tr>
<tr>
<td>12</td>
<td>Investments – other securities. See Part IV, line 11</td>
<td>12</td>
</tr>
<tr>
<td>13</td>
<td>Investments – program-related. See Part IV, line 11</td>
<td>13</td>
</tr>
<tr>
<td>14</td>
<td>Intangible assets</td>
<td>14</td>
</tr>
<tr>
<td>15</td>
<td>Other assets. See Part IV, line 11</td>
<td>27,590,965</td>
</tr>
<tr>
<td>16</td>
<td>Total assets. Add lines 1 through 15 (must equal line 34)</td>
<td>106,106,157</td>
</tr>
<tr>
<td>17</td>
<td>Accounts payable and accrued expenses</td>
<td>5,389</td>
</tr>
<tr>
<td>18</td>
<td>Grants payable</td>
<td>16,500</td>
</tr>
<tr>
<td>19</td>
<td>Deferred revenue</td>
<td>19</td>
</tr>
<tr>
<td>20</td>
<td>Tax-exempt bond liabilities</td>
<td>20</td>
</tr>
<tr>
<td>21</td>
<td>Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td>21</td>
</tr>
<tr>
<td>22</td>
<td>Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L</td>
<td>22</td>
</tr>
<tr>
<td>23</td>
<td>Secured mortgages and notes payable to unrelated third parties</td>
<td>23</td>
</tr>
<tr>
<td>24</td>
<td>Unsecured notes and loans payable to unrelated third parties</td>
<td>24</td>
</tr>
<tr>
<td>25</td>
<td>Other liabilities (including federal income tax; payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D</td>
<td>25</td>
</tr>
<tr>
<td>26</td>
<td>Total liabilities. Add lines 17 through 25</td>
<td>24,407,766</td>
</tr>
<tr>
<td>27</td>
<td>Organizations that follow SFAS 117 (ASC 958), check here and complete lines 27 through 29, and lines 33 and 34.</td>
<td>71,233,291</td>
</tr>
<tr>
<td>28</td>
<td>Unrestricted net assets</td>
<td>10,465,100</td>
</tr>
<tr>
<td>29</td>
<td>Temporarily restricted net assets</td>
<td>29</td>
</tr>
<tr>
<td>30</td>
<td>Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.</td>
<td></td>
</tr>
<tr>
<td>31</td>
<td>Capital stock or trust principal, or current funds</td>
<td>30</td>
</tr>
<tr>
<td>32</td>
<td>Paid-in or capital surplus, or land, building, or equipment fund</td>
<td>31</td>
</tr>
<tr>
<td>33</td>
<td>Retained earnings, endowment, accumulated income, or other funds</td>
<td>32</td>
</tr>
<tr>
<td>34</td>
<td>Total net assets or fund balances</td>
<td>81,698,391</td>
</tr>
<tr>
<td>35</td>
<td>Total liabilities and net assets/fund balances</td>
<td>106,106,157</td>
</tr>
</tbody>
</table>
### Part 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): 10,518,575.
2. Total expenses (must equal Part IX, column (A), line 25): 6,727,736.
3. Revenue less expenses. Subtract line 2 from line 1: 3,790,839.
4. Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)): 81,698,391.
6. Donated services and use of facilities: 71,537.
7. Investment expenses: 81,926,024.
8. Prior period adjustments: 81,926,024.
9. Other changes in net assets or fund balances (explain in Schedule O): SEE SCHEDULE O
10. Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)): 81,926,024.

### Part XII | Financial Statements and Reporting

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

1. Accounting method used to prepare the Form 990: [X] Accrual
   - If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.

2a. Were the organization’s financial statements compiled or reviewed by an independent accountant? [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

2b. Were the organization’s financial statements audited by an independent accountant? [X]
   - If ‘Yes,’ check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
     - Separate basis
     - Consolidated basis
     - Both consolidated and separate basis

2c. If ‘Yes’ to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? [X]
   - If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a. As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? [X]
   - If ‘Yes,’ did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. [ ]
Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

---

## Name of the organization

COMMUNITY FOUNDATION OF CENTRAL GA, INC. 58-2053465

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

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

1. A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2. A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)
3. A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4. A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:
5. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
6. A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7. An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). Enter the number of supported organizations .
9. An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3).
10. An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)

---

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) EIN</th>
<th>(iii) Type of organization (described on lines 1-9 above (see instructions))</th>
<th>(iv) Is the organization listed in your governing document?</th>
<th>(v) Amount of monetary support (see instructions)</th>
<th>(vi) Amount of other support (see instructions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(A)</td>
<td></td>
<td></td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(B)</td>
<td></td>
<td></td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(C)</td>
<td></td>
<td></td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(D)</td>
<td></td>
<td></td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(E)</td>
<td></td>
<td></td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total

---

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2011</th>
<th>(b) 2012</th>
<th>(c) 2013</th>
<th>(d) 2014</th>
<th>(e) 2015</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and</td>
<td>3,935,982</td>
<td>6,014,739</td>
<td>21686331.</td>
<td>8,553,735.</td>
<td>6,667,443.</td>
<td>46,858,230.</td>
</tr>
<tr>
<td>membership fees received. (Do not</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>include any 'unusual grants'.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Tax revenues levied for the</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>organization's benefit and either paid</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>to or expended on its behalf.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 The value of services or</td>
<td></td>
<td></td>
<td>0.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>facilities furnished by a</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>governmental unit to the</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>organization without charge.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Total. Add lines 1 through 3.</td>
<td>3,935,982</td>
<td>6,014,739</td>
<td>21686331.</td>
<td>8,553,735.</td>
<td>6,667,443.</td>
<td>46,858,230.</td>
</tr>
<tr>
<td>5 The portion of total</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>contributions by each person</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>(other than a governmental unit or</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>publicly supported organization) included</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>on line 1 that exceeds 2% of the amount</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>shown on line 11, column (f).</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Public support. Subtract line 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>from line 4.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>6,543,642.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>40,314,588.</td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2011</th>
<th>(b) 2012</th>
<th>(c) 2013</th>
<th>(d) 2014</th>
<th>(e) 2015</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 Amounts from line 4</td>
<td>3,935,982</td>
<td>6,014,739</td>
<td>21686331.</td>
<td>8,553,735.</td>
<td>6,667,443.</td>
<td>46,858,230.</td>
</tr>
<tr>
<td>8 Gross income from interest,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>dividends, payments received</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>on securities loans, rents,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>royalties and income from</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>similar sources.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Net income from unrelated</td>
<td>1,677,815.</td>
<td>1,621,402.</td>
<td>2,334,598.</td>
<td>2,768,323.</td>
<td>2,585,413.</td>
<td>10,987,551.</td>
</tr>
<tr>
<td>business activities, whether or</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>not the business is regularly</td>
<td></td>
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<td></td>
<td></td>
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</tr>
<tr>
<td>carried on.</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>10 Other income. Do not include</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>gain or loss from the sale of</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>capital assets. (Explain in</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Part VI.)</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>11 Total support. Add lines 7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>through 10.</td>
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</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>57,758,384.</td>
<td></td>
</tr>
<tr>
<td>12 Gross receipts from related activities,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>etc. (see instructions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>12</td>
<td>0.</td>
</tr>
<tr>
<td>13 First five years. If the Form 990 for</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>the organization's first, second,</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>third, fourth, or fifth tax year as a</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>section 501(c)(3) organization, check this</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>box and stop here.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th>Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))</th>
<th>(a) 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>14</td>
<td>69.80%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Public support percentage from 2014 Schedule A, Part II, line 14.</th>
<th>(a) 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>15</td>
<td>73.31%</td>
</tr>
</tbody>
</table>

| 16a 33-1/3% support test – 2015. If the organization did not check | (a) 2015 |
| the box on line 13, and line 14 is 33-1/3% or more, check this   | 73.31%   |
| box and stop here. The organization qualifies as a publicly      |          |
| supported organization.                                          |          |

| 16b 33-1/3% support test – 2014. If the organization did not     | (a) 2015 |
| check a box on line 13 or 16a, and line 15 is 33-1/3% or more,   | 73.31%   |
| check this box and stop here. The organization qualifies as a    |          |
| publicly supported organization.                                 |          |

| 17a 10%-facts-and-circumstances test – 2015. If the organization | (a) 2015 |
| did not check a box on line 13, 16a, 16b, or 17a, and line 14 is | 69.80%   |
| 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. |          |

| 17b 10%-facts-and-circumstances test – 2014. If the organization | (a) 2015 |
| did not check a box on line 13, 16a, 16b, or 17a, and line 15 is | 73.31%   |
| 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. |          |

| 18 Private foundation. If the organization did not check a box | (a) 2015 |
| on line 13, 16a, 16b, 17a, or 17b, check this box and see       | 69.80%   |
| instructions.                                                 |          |
### Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

#### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2011</th>
<th>(b) 2012</th>
<th>(c) 2013</th>
<th>(d) 2014</th>
<th>(e) 2015</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions and membership fees received. (Do not include any ‘unusual grants.”)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization’s tax-exempt purpose</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Total. Add lines 1 through 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2011</th>
<th>(b) 2012</th>
<th>(c) 2013</th>
<th>(d) 2014</th>
<th>(e) 2015</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Total support. (Add lines 9, 10a, 10b, 11, and 12)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th>Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))</th>
<th>15</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public support percentage from 2014 Schedule A, Part III, line 15</td>
<td>16</td>
<td>%</td>
</tr>
</tbody>
</table>

#### Section D. Computation of Investment Income Percentage

<table>
<thead>
<tr>
<th>Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))</th>
<th>17</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Investment income percentage from 2014 Schedule A, Part III, line 17</td>
<td>18</td>
<td>%</td>
</tr>
</tbody>
</table>

- **19a 33-1/3% support tests – 2015.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization.
- **19b 33-1/3% support tests – 2014.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization.
- **20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.
### Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Are all of the organization's supported organizations listed by name in the organization's governing documents?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a. Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Substitutions only. Was the substitution the result of an event beyond the organization's control?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in Part VI.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Did a disqualified 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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part IV Supporting Organizations (continued)

<table>
<thead>
<tr>
<th>Section</th>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Part B</strong></td>
<td>Type I Supporting Organizations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>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.</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organization(s)? If ‘Yes,’ describe in Part VI the role played by the organization’s supported organizations in this regard.</td>
<td>2</td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Type II Supporting Organizations

<table>
<thead>
<tr>
<th>Section</th>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>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 ‘Yes,’ explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</td>
<td>1</td>
<td></td>
</tr>
</tbody>
</table>

### Section D. All Type III Supporting Organizations

<table>
<thead>
<tr>
<th>Section</th>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>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?</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>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)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section E. Type III Functionally-Integrated Supporting Organizations

<table>
<thead>
<tr>
<th>Section</th>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>The organization satisfied the Activities Test. Complete line 2 below.</td>
<td>2a</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>The organization is the parent of each of its supported organizations. Complete line 3 below.</td>
<td>2b</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Activities Test. Answer (a) and (b) below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>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.</td>
<td>2a</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>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.</td>
<td>2b</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Parent of Supported Organizations. Answer (a) and (b) below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>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.</td>
<td>3a</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If ‘Yes,’ describe in Part VI the role played by the organization in this regard.</td>
<td>3b</td>
<td></td>
</tr>
</tbody>
</table>
# Schedule A (Form 990 or 990-EZ) 2015
COMMUNITY FOUNDATION OF CENTRAL GA, INC. 58-2053465

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

### Section A — Adjusted Net Income

<table>
<thead>
<tr>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Net short-term capital gain</td>
<td>1</td>
</tr>
<tr>
<td>2 Recoveries of prior-year distributions</td>
<td>2</td>
</tr>
<tr>
<td>3 Other gross income (see instructions)</td>
<td>3</td>
</tr>
<tr>
<td>4 Add lines 1 through 3</td>
<td>4</td>
</tr>
<tr>
<td>5 Depreciation and depletion</td>
<td>5</td>
</tr>
<tr>
<td>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)</td>
<td>6</td>
</tr>
<tr>
<td>7 Other expenses (see instructions)</td>
<td>7</td>
</tr>
<tr>
<td>8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)</td>
<td>8</td>
</tr>
</tbody>
</table>

### Section B — Minimum Asset Amount

<table>
<thead>
<tr>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):</td>
<td></td>
</tr>
<tr>
<td>a Average monthly value of securities</td>
<td>1a</td>
</tr>
<tr>
<td>b Average monthly cash balances</td>
<td>1b</td>
</tr>
<tr>
<td>c Fair market value of other non-exempt-use assets</td>
<td>1c</td>
</tr>
<tr>
<td>d Total (add lines 1a, 1b, and 1c)</td>
<td>1d</td>
</tr>
<tr>
<td>e Discount claimed for blockage or other factors (explain in detail in Part VI):</td>
<td></td>
</tr>
<tr>
<td>2 Acquisition indebtedness applicable to non-exempt-use assets</td>
<td>2</td>
</tr>
<tr>
<td>3 Subtract line 2 from line 1d</td>
<td>3</td>
</tr>
<tr>
<td>4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)</td>
<td>4</td>
</tr>
<tr>
<td>5 Net value of non-exempt-use assets (subtract line 4 from line 3)</td>
<td>5</td>
</tr>
<tr>
<td>6 Multiply line 5 by .035</td>
<td>6</td>
</tr>
<tr>
<td>7 Recoveries of prior-year distributions</td>
<td>7</td>
</tr>
<tr>
<td>8 Minimum Asset Amount (add line 7 to line 6)</td>
<td>8</td>
</tr>
</tbody>
</table>

### Section C — Distributable Amount

<table>
<thead>
<tr>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Adjusted net income for prior year (from Section A, line 8, Column A)</td>
<td>1</td>
</tr>
<tr>
<td>2 Enter 85% of line 1</td>
<td>2</td>
</tr>
<tr>
<td>3 Minimum asset amount for prior year (from Section B, line 8, Column A)</td>
<td>3</td>
</tr>
<tr>
<td>4 Enter greater of line 2 or line 3</td>
<td>4</td>
</tr>
<tr>
<td>5 Income tax imposed in prior year</td>
<td>5</td>
</tr>
<tr>
<td>6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)</td>
<td>6</td>
</tr>
<tr>
<td>7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)</td>
<td></td>
</tr>
</tbody>
</table>

Check here if the organization satisfied the Integral Part Test as a qualifying trust on November 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.
### Part V  Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

#### Section D — Distributions

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Amounts paid to supported organizations to accomplish exempt purposes.</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity.</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Administrative expenses paid to accomplish exempt purposes of supported organizations</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Amounts paid to acquire exempt-use assets.</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Qualified set-aside amounts (prior IRS approval required)</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Other distributions (describe in Part VI). See instructions.</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Total annual distributions. Add lines 1 through 6.</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Distributable amount for 2015 from Section C, line 6.</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Line 8 amount divided by Line 9 amount</td>
<td></td>
</tr>
</tbody>
</table>

#### Section E — Distribution Allocations (see instructions)

<table>
<thead>
<tr>
<th></th>
<th>Excess Distributions</th>
<th>Underdistributions Pre-2015</th>
<th>Distributable Amount for 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Distributable amount for 2015 from Section C, line 6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Underdistributions, if any, for years prior to 2015 (reasonable cause required — see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Excess distributions carryover, if any, to 2015:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>c</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>d From 2013</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>e From 2014</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>f Total of lines 3a through e</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>g Applied to underdistributions of prior years</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>h Applied to 2015 distributable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>i Carryover from 2010 not applied (see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>j Remainder. Subtract lines 3g, 3h, and 3i from 3f</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Distributions for 2015 from Section D, line 7:</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Applied to underdistributions of prior years</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b Applied to 2015 distributable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>c Remainder. Subtract lines 4a and 4b from 4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Excess distributions carryover to 2016. Add lines 3j and 4c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Breakdown of line 7:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>b</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>c Excess from 2013</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>d Excess from 2014</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>e Excess from 2015</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Part VI Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.

(See instructions.)

**PART II, LINE 10 - OTHER INCOME**

|-------------------|------|------|------|------|------|
## Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 6.

<table>
<thead>
<tr>
<th></th>
<th>(a) Donor advised funds</th>
<th>(b) Funds and other accounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Total number at end of year</td>
<td>119</td>
<td>4</td>
</tr>
<tr>
<td>2 Aggregate value of contributions to (during year)</td>
<td>3,662,675</td>
<td></td>
</tr>
<tr>
<td>3 Aggregate value of grants from (during year)</td>
<td>2,890,479</td>
<td>34,500</td>
</tr>
<tr>
<td>4 Aggregate value at end of year</td>
<td>42,279,131</td>
<td>671,855</td>
</tr>
</tbody>
</table>

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? [X Yes  No]

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? [X Yes  No]

## Part II Conservation Easements.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 7.

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

- Preservation of land for public use (e.g., recreation or education)
- Protection of natural habitat
- Preservation of open space
- Preservation of a historically important land area
- Preservation of a certified historic structure

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

<table>
<thead>
<tr>
<th></th>
<th>Held at the End of the Tax Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>a Total number of conservation easements</td>
<td>2a</td>
</tr>
<tr>
<td>b Total acreage restricted by conservation easements</td>
<td>2b</td>
</tr>
<tr>
<td>c Number of conservation easements on a certified historic structure included in (a)</td>
<td>2c</td>
</tr>
<tr>
<td>d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register</td>
<td>2d</td>
</tr>
</tbody>
</table>

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

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

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

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? [X Yes  No]

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

## Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 8.

1 If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>a Revenue included on Form 990, Part VIII, line 1</td>
<td>►$</td>
</tr>
<tr>
<td>b Assets included in Form 990, Part X</td>
<td>►$</td>
</tr>
</tbody>
</table>
Schedule D (Form 990) 2015  COMMUNITY FOUNDATION OF CENTRAL GA, INC.  58-2053465  Page 2

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
   a  Public exhibition
   b  Scholarly research
   c  Preservation for future generations
   d  Loan or exchange programs
   e  Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

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

1 a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
   b If 'Yes,' explain the arrangement in Part XIII and complete the following table:

<table>
<thead>
<tr>
<th></th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>c  Beginning balance</td>
<td></td>
</tr>
<tr>
<td>d  Additions during the year</td>
<td></td>
</tr>
<tr>
<td>e  Distributions during the year</td>
<td></td>
</tr>
<tr>
<td>f  Ending balance</td>
<td></td>
</tr>
</tbody>
</table>

2 a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
   b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.

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

1 a Beginning of year balance:  78,400,443.
   b Contributions:  4,325,047.
   c Net investment earnings, gains, and losses:  -309,964.
   d Grants or scholarships:  -4,018,164.
   e Other expenditures for facilities and programs:  -101,049.
   f Administrative expenses:  -740,258.
   g End of year balance:  77,556,055.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
   a  Board designated or quasi-endowment:  100.00%
   b  Permanent endowment:  %
   c  Temporarily restricted endowment:  %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
   (i)  unrelated organizations:  3a(i)  X
   (ii) related organizations:  3a(ii)  X
   b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R?  3b

4 Describe in Part XIII the intended uses of the organization's endowment funds.  SEE PART XIII

Part VI  Land, Buildings, and Equipment.

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

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 a Land</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 b Buildings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 c Leasehold improvements</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 d Equipment</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 e Other</td>
<td>230,906.</td>
<td>223,832.</td>
<td>7,074.</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)</td>
<td></td>
<td>7,074.</td>
<td></td>
</tr>
</tbody>
</table>

BAA
### Part VII Investments – Other Securities

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

<table>
<thead>
<tr>
<th>(a) Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Closely-held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(A)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(B)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(C)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(D)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(E)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(F)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(G)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(H)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(I)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total. <em>(Column (b) must equal Form 990, Part X, column (B) line 12)</em></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 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.

<table>
<thead>
<tr>
<th>(a) Description of investment</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(10)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total. <em>(Column (b) must equal Form 990, Part X, column (B) line 13)</em></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part IX Other Assets

Complete if the organization answered ‘Yes’ on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Assets held in split interest agreements</td>
<td>25,652,640.</td>
</tr>
<tr>
<td>(2) Collections</td>
<td>12,000.</td>
</tr>
<tr>
<td>(3) Contributions receivable</td>
<td>243,500.</td>
</tr>
<tr>
<td>(4) Interest &amp; dividends receivable</td>
<td>82,811.</td>
</tr>
<tr>
<td>(5) Property held for resale</td>
<td>922,000.</td>
</tr>
<tr>
<td>(6)</td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
<tr>
<td>(10)</td>
<td></td>
</tr>
<tr>
<td>Total. <em>(Column (b) must equal Form 990, Part X, column (B) line 15)</em></td>
<td>26,912,951.</td>
</tr>
</tbody>
</table>

### Part X Other Liabilities

Complete if the organization answered ‘Yes’ on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25

<table>
<thead>
<tr>
<th>(a) Description of liability</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Federal income taxes</td>
<td></td>
</tr>
<tr>
<td>(2) Accrued annual leave</td>
<td>4,707.</td>
</tr>
<tr>
<td>(3) Agency endowments</td>
<td>8,250,832.</td>
</tr>
<tr>
<td>(4) Liabilities under split interest agreement</td>
<td>15,786,653.</td>
</tr>
<tr>
<td>(5)</td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
<tr>
<td>(10)</td>
<td></td>
</tr>
<tr>
<td>(11)</td>
<td></td>
</tr>
<tr>
<td>Total. <em>(Column (b) must equal Form 990, Part X, column (B) line 25)</em></td>
<td>24,042,192.</td>
</tr>
</tbody>
</table>

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization’s financial statements that reports the organization’s liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII. 

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**Schedule D (Form 990) 2015**

**COMMUNITY FOUNDATION OF CENTRAL GA, INC.**

**58-2053465**

**Page 3**
**Part XI | Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

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

<table>
<thead>
<tr>
<th>1</th>
<th>Total revenue, gains, and other support per audited financial statements.</th>
<th>6,061,718.</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>Net unrealized gains (losses) on investments</td>
<td>-3,634,743.</td>
</tr>
<tr>
<td>2b</td>
<td>Donated services and use of facilities</td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td>Recoveries of prior year grants</td>
<td></td>
</tr>
<tr>
<td>2d</td>
<td>Other (Describe in Part XIII).</td>
<td>41,558.</td>
</tr>
<tr>
<td>2e</td>
<td>Add lines 2a through 2d</td>
<td>-3,593,185.</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>9,654,903.</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part VIII, line 12, but not on line 1:</td>
<td></td>
</tr>
<tr>
<td>4a</td>
<td>Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td></td>
</tr>
<tr>
<td>4b</td>
<td>Other (Describe in Part XIII.).</td>
<td>863,672.</td>
</tr>
<tr>
<td>4c</td>
<td>Add lines 4a and 4b</td>
<td>863,672.</td>
</tr>
<tr>
<td>5</td>
<td>Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)</td>
<td>10,518,575.</td>
</tr>
</tbody>
</table>

**Part XII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

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

<table>
<thead>
<tr>
<th>1</th>
<th>Total expenses and losses per audited financial statements</th>
<th>5,834,085.</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>Donated services and use of facilities</td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td>Prior year adjustments</td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td>Other losses</td>
<td></td>
</tr>
<tr>
<td>2d</td>
<td>Other (Describe in Part XIII.).</td>
<td></td>
</tr>
<tr>
<td>2e</td>
<td>Add lines 2a through 2d</td>
<td>5,834,085.</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part IX, line 25, but not on line 1:</td>
<td></td>
</tr>
<tr>
<td>4a</td>
<td>Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td>893,651.</td>
</tr>
<tr>
<td>4b</td>
<td>Other (Describe in Part XIII.).</td>
<td>893,651.</td>
</tr>
<tr>
<td>4c</td>
<td>Add lines 4a and 4b</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)</td>
<td>6,727,736.</td>
</tr>
</tbody>
</table>

**Part XIII | Supplemental Information.**

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

**PART V, LINE 4 - INTENDED USES OF ENDOWMENT FUND**

ENDOWMENT FUNDS ARE TO BE USED FOR CHARITABLE GRANTS IN ACCORDANCE WITH FOUNDATION'S MISSION OF ENHANCING THE QUALITY OF LIFE FOR THE PEOPLE OF CENTRAL GEORGIA.

**SCHEDULE D, PART XI, LINE 2D**

OTHER REVENUE INCLUDED IN F/S BUT NOT INCLUDED ON FORM 990

<table>
<thead>
<tr>
<th>CHANGE IN SPLIT INTEREST TRUST</th>
<th>$ 41,558.</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOTAL</td>
<td>$ 41,558.</td>
</tr>
</tbody>
</table>
**SCHEDULE D, PART XI, LINE 4B**
OTHER REVENUE INCLUDED ON FORM 990 BUT NOT INCLUDED IN F/S

ASC BOOK \ TAX DIFFERENCE ................................................................. $ 863,672.

TOTAL $ 863,672.

**SCHEDULE D, PART XII, LINE 4B**
OTHER EXPENSES INCLUDED ON FORM 990 BUT NOT INCLUDED IN F/S

ASC BOOK \ TAX DIFFERENCE ................................................................. $ 893,651.

TOTAL $ 893,651.
## Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes**

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States. **SEE PART IV**

## Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments

Complete if the organization answered ‘Yes’ on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section if applicable</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
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<tbody>
<tr>
<td>1</td>
<td>SCHEDULE ATTACHED</td>
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</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. **127**

3. Enter total number of other organizations listed in the line 1 table. **6**
<table>
<thead>
<tr>
<th>(a) Name of Organization</th>
<th>(a) Recipient Address Block</th>
<th>(a) Recipient City</th>
<th>(a) Recipient State</th>
<th>(a) Recipient Zip</th>
<th>(b) EIN</th>
<th>(c) IRC section if applicable</th>
<th>(d) Amount of cash grant</th>
<th>(h) Purpose of Grant or Assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>100 Black Men of Macon-Middle Georgia, Inc.</td>
<td>P.O. Box 2363</td>
<td>Macon</td>
<td>GA</td>
<td>31203</td>
<td>58-2221295</td>
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<td>Career Fest</td>
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<tr>
<td>Abundant Life Soup Kitchen, Inc.</td>
<td>132 North 10th Street</td>
<td>Griffin</td>
<td>GA</td>
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<td>59-3762964</td>
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<td>Advocacy Resource Center of Macon</td>
<td>4664 Sheraton Drive</td>
<td>Macon</td>
<td>GA</td>
<td>31210</td>
<td>58-0836285</td>
<td>501c(3)</td>
<td>$12,500</td>
<td>Renovation of Kitchen at Residential Group Home</td>
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<tr>
<td>Alzheimer's Association - Central Georgia</td>
<td>886 Mulberry Street</td>
<td>Macon</td>
<td>GA</td>
<td>31201</td>
<td>58-1492046</td>
<td>501c(3)</td>
<td>$15,000</td>
<td>Macon Community Outreach Center Technology</td>
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<td>886 Mulberry Street</td>
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<td>GA</td>
<td>31201</td>
<td>58-1492046</td>
<td>501c(3)</td>
<td>$500</td>
<td>General contribution</td>
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<td>GA</td>
<td>31201</td>
<td>58-1492046</td>
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<td>$1,000</td>
<td>Family and professional caregiver education</td>
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<td>$4,400</td>
<td>Dancing with the Stars</td>
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<tr>
<td>Angel Flight Soars</td>
<td>2000 Airport Road Suite 227</td>
<td>Atlanta</td>
<td>GA</td>
<td>30341</td>
<td>58-1702393</td>
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<td>Fly a Georgia Patient Program</td>
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<tr>
<td>Annandale Village</td>
<td>3500 Annandale Lane, Suite 227</td>
<td>Suwanee</td>
<td>GA</td>
<td>30024</td>
<td>59-0891470</td>
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<td>$350,000</td>
<td>Matching grant for the completion of the Assisted Living Center for citizens with developmental disabilities</td>
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<tr>
<td>Asbury University</td>
<td>1 Macklem Drive</td>
<td>Wilmore</td>
<td>KY</td>
<td>40390</td>
<td>61-0568355</td>
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<td>$30,000</td>
<td>General contribution</td>
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<tr>
<td>Austin Smith Center for Development Inc.</td>
<td>121 Horseshoe Bend Court</td>
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<td>GA</td>
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<td>46-1189551</td>
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<td>Keep America Beautiful Iron Eyes Cody Award Ceremony</td>
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<tr>
<td>Austin Smith Center for Development Inc.</td>
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<td>GA</td>
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<td>National Resident Shalom Zone Leadership Training</td>
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<td>Bibb County School District</td>
<td>484 Mulberry Street</td>
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<td>31201</td>
<td>58-6000191</td>
<td>Government Entity</td>
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<td>For the Leader In Me project</td>
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<td>Bibb County Sheriff's Office</td>
<td>P.O. Box 930</td>
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<td>31202</td>
<td>46-3922371</td>
<td>Government Entity</td>
<td>$7,000</td>
<td>Support for the Youth CHAMPS program</td>
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<td>Big Brothers Big Sisters of the Heart of Georgia</td>
<td>2720 Riverside Drive, Suite 123</td>
<td>Macon</td>
<td>GA</td>
<td>31204</td>
<td>58-0707593</td>
<td>501c(3)</td>
<td>$15,000</td>
<td>Read 2 Succeed Mentoring</td>
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<tr>
<td>Big Brothers Big Sisters of the Heart of Georgia</td>
<td>2720 Riverside Drive, Suite 123</td>
<td>Macon</td>
<td>GA</td>
<td>31204</td>
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<td>Mentoring children of prisoners</td>
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<td>Big Brothers Big Sisters of the Heart of Georgia</td>
<td>2720 Riverside Drive, Suite 123</td>
<td>Macon</td>
<td>GA</td>
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<td>General Contribution</td>
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<td>58-0707593</td>
<td>501c(3)</td>
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<td>4335 Confederate Way</td>
<td>Macon</td>
<td>GA</td>
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<td>Scouting &quot;Preparing Youth for Life&quot;</td>
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<tr>
<td>Boy Scouts of America - Central GA Council</td>
<td>4335 Confederate Way</td>
<td>Macon</td>
<td>GA</td>
<td>31217</td>
<td>58-033976</td>
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<td>Fort Valley Scouting Programs</td>
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<td>58-033976</td>
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<td>Scouting programs in Bibb County</td>
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<tr>
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<td>4335 Confederate Way</td>
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<td>31217</td>
<td>58-033976</td>
<td>501c(3)</td>
<td>$1,000</td>
<td>General contribution</td>
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<tr>
<td>Boy Scouts of America - Central GA Council</td>
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<td>GA</td>
<td>31217</td>
<td>58-033976</td>
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<td>GA</td>
<td>31217</td>
<td>58-033976</td>
<td>501c(3)</td>
<td>$1,000</td>
<td>General contribution</td>
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<tr>
<td>Boys and Girls Clubs of Central Georgia</td>
<td>277 MLK Jr. Blvd, Suite 202</td>
<td>Macon</td>
<td>GA</td>
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<td>58-0261444</td>
<td>501c(3)</td>
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<td>Support for new club, King Danforth Boys and Girls Club</td>
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<tr>
<td>Boys and Girls Clubs of Central Georgia</td>
<td>277 MLK Jr. Blvd, Suite 202</td>
<td>Macon</td>
<td>GA</td>
<td>31201</td>
<td>58-0261444</td>
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<td>General Contribution</td>
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<td>Boys and Girls Clubs of Central Georgia</td>
<td>277 MLK Jr. Blvd, Suite 202</td>
<td>Macon</td>
<td>GA</td>
<td>31201</td>
<td>58-0261444</td>
<td>501c(3)</td>
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<td>General contribution</td>
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<tr>
<td>Boys and Girls Clubs of Central Georgia</td>
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<td>Project Learn-King Danforth</td>
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<td>Bragg Jam, Inc.</td>
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<td>Macon</td>
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<td>31208</td>
<td>113749741</td>
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<td>$3,191</td>
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<tr>
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<td>Macon</td>
<td>GA</td>
<td>31208</td>
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<td>501c(3)</td>
<td>$12,500</td>
<td>Magnolia Soap Box Derby and travel expenses to participate in city exchange.</td>
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<tr>
<td>Brave Meadows Therapeutic Riding Center</td>
<td>1094 Eatonton Highway</td>
<td>Gray</td>
<td>GA</td>
<td>31032</td>
<td>20-3199462</td>
<td>501c(3)</td>
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<td>Therapeutic riding lessons for people of all ages with physical or emotional problems and support for the care of horses</td>
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<tr>
<td>Brave Meadows Therapeutic Riding Center</td>
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<td>Gray</td>
<td>GA</td>
<td>31032</td>
<td>20-3199462</td>
<td>501c(3)</td>
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<td>Therapy Horse Fund</td>
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<td>(a) Name of Organization</td>
<td>(a) Recipient Address Block</td>
<td>(a) Recipient City</td>
<td>(a) Recipient State</td>
<td>(a) Recipient Zip</td>
<td>(b) EIN</td>
<td>(c) IRC Section if applicable</td>
<td>(d) Amount of Cash Grant</td>
<td>(h) Purpose of Grant or Assistance</td>
</tr>
<tr>
<td>--------------------------</td>
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<td>Brave Meadows Therapeutic Riding Center</td>
<td>1094 Eatonton Highway</td>
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<td>GA</td>
<td>3102</td>
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<td>501(c)(3)</td>
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<td>Therapeutic riding lessons for people of all ages with physical or emotional problems and support for the care of horses</td>
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<tr>
<td>Cafe Central</td>
<td>Freedom Church 500 Underwood Drive</td>
<td>Milledgeville</td>
<td>GA</td>
<td>31061</td>
<td>32-0449433</td>
<td>501(c)(3)</td>
<td>$1,500</td>
<td>Feeding over 500 every week and over 1000 on Thanksgiving and Christmas</td>
</tr>
<tr>
<td>Cafe Central</td>
<td>Freedom Church 500 Underwood Drive</td>
<td>Milledgeville</td>
<td>GA</td>
<td>31061</td>
<td>32-0449433</td>
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<td>Feeding over 500 every week and over 1000 on Thanksgiving and Christmas</td>
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<td>Freedom Church 500 Underwood Drive</td>
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<td>32-0449433</td>
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<td>Feeding over 500 every week and over 1000 on Thanksgiving and Christmas</td>
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<td>Freedom Church 500 Underwood Drive</td>
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<td>32-0449433</td>
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<td>Feeding over 500 every week and over 1000 on Thanksgiving and Christmas</td>
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<td>2193 Vineville Avenue</td>
<td>Macon</td>
<td>GA</td>
<td>31204</td>
<td>58-2373761</td>
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<td>Campus Clubs, Inc.</td>
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<td>Macon</td>
<td>GA</td>
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<td>GA</td>
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<td>58-2373761</td>
<td>501(c)(3)</td>
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<tr>
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<td>Macon</td>
<td>GA</td>
<td>31204</td>
<td>58-2373761</td>
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<td>Macon</td>
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<td>$400</td>
<td>Camperships for Bob Hoffman Basketball Camp</td>
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<td>GA</td>
<td>31204</td>
<td>58-2373761</td>
<td>501(c)(3)</td>
<td>$400</td>
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<td>Cannonball House</td>
<td>856 Mulberry Street</td>
<td>Macon</td>
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<td>31201</td>
<td>58-1740130</td>
<td>501(c)(3)</td>
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<td>Maintenance and house improvements</td>
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<td>Macon</td>
<td>GA</td>
<td>31201</td>
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<tr>
<td>Centenary Community Ministries, Inc.</td>
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<td>GA</td>
<td>31201</td>
<td>80-0307351</td>
<td>501(c)(3)</td>
<td>$4,000</td>
<td>Heard in East Macon: Stories from Macon's First Neighborhood</td>
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<td>GA</td>
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<td>GA</td>
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<td>Macon</td>
<td>GA</td>
<td>31201</td>
<td>80-0307351</td>
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<td>Memory and Music Program at the Blair House</td>
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<td>Macon</td>
<td>GA</td>
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<td>28741</td>
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<td>Five Loaves &amp; Two Fish Food Pantry</td>
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<td>Warner Robins</td>
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Page 3 of 13
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<tr>
<th>(a) Name of Organization</th>
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<th>(c) Recipient City</th>
<th>(d) Recipient State</th>
<th>(e) Recipient Zip</th>
<th>(f) EIN</th>
<th>(g) Amount of cash grant</th>
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<td>27-000606</td>
<td>$1,800</td>
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<td>P.O. Box 13358</td>
<td>Macon</td>
<td>GA</td>
<td>31208</td>
<td>51-020143</td>
<td>$100</td>
<td>General contribution</td>
</tr>
<tr>
<td>Historic Macon Foundation, Inc.</td>
<td>P.O. Box 13358</td>
<td>Macon</td>
<td>GA</td>
<td>31208</td>
<td>51-020143</td>
<td>$100</td>
<td>Website support</td>
</tr>
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<td>P.O. Box 13358</td>
<td>Macon</td>
<td>GA</td>
<td>31208</td>
<td>51-020143</td>
<td>$30,000</td>
<td>Support for the relocation of Historic Macon Foundation offices.</td>
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<td>P.O. Box 13358</td>
<td>Macon</td>
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<td>31208</td>
<td>51-020143</td>
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<td>P.O. Box 13358</td>
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<td>GA</td>
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<td>51-020143</td>
<td>$1,500</td>
<td>Support to continue compiling a list of endangered historic properties</td>
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<td>Printing of Rose Hill Report.</td>
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<td>Rose Hill Ramble and Christmas decor at the Main Gate</td>
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<td>Support for improvements to clean-up stations at dog park</td>
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<td>Macon</td>
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<td>$450</td>
<td>Remove paint and graffiti from monuments in Rose Hill Cemetery</td>
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<td>$4,290</td>
<td>For the benefit of the Sidney Lanier Cottage</td>
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<td>(a) Name of Organization</td>
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<td>(a) Recipient City</td>
<td>(a) Recipient State</td>
<td>(b) EIN</td>
<td>(c) IRC section if applicable</td>
<td>(d) Amount of cash grant</td>
<td>(h) Purpose of Grant or Assistance</td>
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<tr>
<td>Historic Riverside Cemetery Conservancy</td>
<td>P.O. Box 373</td>
<td>Macon</td>
<td>GA</td>
<td>31202</td>
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<tr>
<td>Hodac, Inc.</td>
<td>2162 Watson Blvd.</td>
<td>Warner Robins</td>
<td>GA</td>
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<td>58-1333898</td>
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<tr>
<td>Holy Spirit Catholic Parish &amp; School</td>
<td>201 44th Street South</td>
<td>Great Falls</td>
<td>MT</td>
<td>59405</td>
<td>81-0430994</td>
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<tr>
<td>InTown Macon Neighborhood Association</td>
<td>P.O. Box 4811</td>
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<td>GA</td>
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<td>P.O. Box 4811</td>
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<td>31208</td>
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<td>InTown Macon Banners</td>
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<tr>
<td>Jay's HOPE Foundation, Inc.</td>
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<td>31201</td>
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<td>GA</td>
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<td>Daisy Park Improvements</td>
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<tr>
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<td>Completion of the water feature in Daisy Park</td>
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<tr>
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<td>GA</td>
<td>31201</td>
<td>20-5117271</td>
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<td>Jay's HOPE Foundation, Inc.</td>
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<tr>
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<td>Post Office Box 28590</td>
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<td>GA</td>
<td>31221</td>
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<td>31221</td>
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<td>General contribution</td>
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<tr>
<td>Keep Macon Bibb Beautiful Commission</td>
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<tr>
<td>Lamar County Elementary School</td>
<td>228 Roberta Drive</td>
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<td>GA</td>
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<td>GA</td>
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<td>Questioning Scientific Claims Through Socratic Seminar</td>
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<td>586000073</td>
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<td>154 Burnette Road</td>
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<tr>
<td>LIFE League, Inc.</td>
<td>P.O. Box 92</td>
<td>Kathleen</td>
<td>GA</td>
<td>31047</td>
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<td>LIFE League Summer 2016 Project</td>
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<td>GA</td>
<td>31047</td>
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<tr>
<td>(a) Name of Organization</td>
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<td>(a) Recipient City</td>
<td>(a) Recipient State</td>
<td>(a) Recipient Zip</td>
<td>(b) EIN</td>
<td>(c) IRC section if applicable</td>
<td>(d) Amount of cash grant</td>
</tr>
<tr>
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<tr>
<td>Loaves &amp; Fishes Ministries</td>
<td>P.O. Box 825</td>
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<td>GA</td>
<td>31202</td>
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<td>Loaves &amp; Fishes Ministries</td>
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<td>GA</td>
<td>31202</td>
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<tr>
<td>Macon Arts Alliance, Inc.</td>
<td>486 First Street</td>
<td>Macon</td>
<td>GA</td>
<td>31201</td>
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<td>31201</td>
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<td>Macon Arts Alliance, Inc.</td>
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<td>305 Coliseum Drive</td>
<td>Macon</td>
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<td>31201</td>
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<td>Milledgeville/Baldwin County Habitat for Humanity</td>
<td>P.O. Box 605</td>
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<td>501c(3)</td>
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<tr>
<td>Mission to the Word PCA, Inc.</td>
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<td>GA</td>
<td>30074</td>
<td>58-2335982</td>
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<td>Motivating Youth Foundation, Inc.</td>
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<td>(a) Name of Organization</td>
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<td>(c) Recipient City</td>
<td>(d) Recipient State</td>
<td>(e) Recipient Zip</td>
<td>(f) EIN</td>
<td>(g) Purpose of Grant or Assistance</td>
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<td>GA</td>
<td>31210</td>
<td>58-0869333</td>
<td>$7,500 Art Programming, art exhibitions, or acquisitions to the permanent collection</td>
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<td>$500 General contribution</td>
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<td>$1,000 President's Round Table</td>
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<td>$2,500 Addition of a sculpture to the Museum's collection</td>
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<td>$1,500 In recognition of the Museum's community outreach and outstanding leadership</td>
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<tr>
<td>Museum of Aviation</td>
<td>Post Office Box 2469</td>
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<tr>
<td>NewTown Macon</td>
<td>479 Cherry Street</td>
<td>Macon</td>
<td>GA</td>
<td>31201-3320</td>
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<td>GA</td>
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<td>Macon</td>
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<td>$1,000 Support for Leadership Macon class of 2015's Alley Project.</td>
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<td>$1,000 Leadership Macon Class of 2015's &quot;Adopt an Alley&quot; project.</td>
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<td>$10,000 Support for expansion of the Ocmulgee Trail at Madison Street and Riverside Cemetery</td>
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<td>$443 Repairs to Gateway Park</td>
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<td>NewTown Macon</td>
<td>555 Poplar Street</td>
<td>Macon</td>
<td>GA</td>
<td>31201</td>
<td>38-2273893</td>
<td>$1,000 Support for Bike Macon's presentation at the Open Streets Summit in Portland, Oregon</td>
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<tr>
<td>NewTown Macon</td>
<td>555 Poplar Street</td>
<td>Macon</td>
<td>GA</td>
<td>31201</td>
<td>38-2273893</td>
<td>$500 Support for Leadership Macon's Class of 2016 Trail Bridge Project.</td>
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<td>(a) Name of Organization</td>
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<td>(e) Recipient Zip</td>
<td>(f) EIN</td>
<td>(g) Amount of cash grant</td>
<td>(h) Purpose of Grant or Assistance</td>
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<td>Movable Furniture</td>
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<td>3268 Avondale Mill Road</td>
<td>Macon</td>
<td>GA</td>
<td>31216</td>
<td>58-2625316</td>
<td>$15,000</td>
<td>Transporting Students and Families to the Next Level!</td>
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<tr>
<td>North Macon Presbyterian Church</td>
<td>3707 Rivoli Drive</td>
<td>Macon</td>
<td>GA</td>
<td>31210</td>
<td>58-1761731</td>
<td>$50,210</td>
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<tr>
<td>North Macon Presbyterian Church</td>
<td>3707 Rivoli Drive</td>
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<td>GA</td>
<td>31210</td>
<td>58-1761731</td>
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<td>3707 Rivoli Drive</td>
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<td>GA</td>
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<td>Building Fund</td>
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<td>Ocmulgee Land Trust, Inc.</td>
<td>c/o New Town Macon 479 Cherry Street</td>
<td>Macon</td>
<td>GA</td>
<td>31201</td>
<td>58-2278365</td>
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<tr>
<td>Ocmulgee Land Trust, Inc.</td>
<td>c/o New Town Macon 479 Cherry Street</td>
<td>Macon</td>
<td>GA</td>
<td>31201</td>
<td>58-2278365</td>
<td>$6,000</td>
<td>General contribution</td>
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<td>Macon</td>
<td>GA</td>
<td>31201</td>
<td>58-2278365</td>
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<td>General contribution</td>
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<td>Ocmulgee Land Trust, Inc.</td>
<td>c/o New Town Macon 479 Cherry Street</td>
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<td>GA</td>
<td>31201</td>
<td>58-2278365</td>
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<td>Ocmulgee National Monument Association, Inc.</td>
<td>1207 Emery Highway</td>
<td>Macon</td>
<td>GA</td>
<td>31201</td>
<td>58-6033381</td>
<td>$4,500</td>
<td>Funding for Native American educators for Every Kid in a Park, April 4-8, 2016.</td>
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<tr>
<td>Ocmulgee National Monument Association, Inc.</td>
<td>1207 Emery Highway</td>
<td>Macon</td>
<td>GA</td>
<td>31201</td>
<td>58-6033381</td>
<td>$14,000</td>
<td>Support of expenses to bring 8 performers of Alaska Native dance and games (athletics) the 25th Ocmulgee Indian Celebration in September, 2016.</td>
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<tr>
<td>Oconee River Greenway Foundation, Inc.</td>
<td>P.O. Box 1831</td>
<td>Milledgeville</td>
<td>GA</td>
<td>31061</td>
<td>20-0440767</td>
<td>$295</td>
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<tr>
<td>Oconee River Greenway Foundation, Inc.</td>
<td>P.O. Box 1831</td>
<td>Milledgeville</td>
<td>GA</td>
<td>31061</td>
<td>20-0440767</td>
<td>$331</td>
<td>Open Streets Summit</td>
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<td>Milledgeville</td>
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<td>31061</td>
<td>20-0440767</td>
<td>$35,000</td>
<td>AT1 Under the Overpass</td>
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<tr>
<td>Onida Baptist Institute</td>
<td>P.O. Box 67</td>
<td>Oneida</td>
<td>KY</td>
<td>40972</td>
<td>61-0478627</td>
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<td>General contribution</td>
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<tr>
<td>Otis Redding Foundation</td>
<td>339 Cotton Avenue</td>
<td>Macon</td>
<td>GA</td>
<td>31201-2685</td>
<td>58-2435617</td>
<td>$3,650</td>
<td>To fund site visits to music charter schools in Atlanta, Augusta and Chattanooga to learn successful practices for the planned Otis Redding DREAM Academy</td>
</tr>
<tr>
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<td>339 Cotton Avenue</td>
<td>Macon</td>
<td>GA</td>
<td>31201-2685</td>
<td>58-2435617</td>
<td>$2,250</td>
<td>Updating the Otis Redding Center for Creative Arts on Cotton Avenue</td>
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<td>Macon</td>
<td>GA</td>
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<td>58-2435617</td>
<td>$1,000</td>
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<td>58-2435617</td>
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<td>General contribution</td>
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<td>GA</td>
<td>31201-2685</td>
<td>58-2435617</td>
<td>$15,000</td>
<td>Otis Redding Center for Creative Arts</td>
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<td>Macon</td>
<td>GA</td>
<td>31201-2685</td>
<td>58-2435617</td>
<td>$400</td>
<td>General contribution</td>
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<tr>
<td>Peachtree Road United Methodist Church</td>
<td>3180 Peachtree Road, NW</td>
<td>Atlanta</td>
<td>GA</td>
<td>30305</td>
<td>58-0655363</td>
<td>$5,000</td>
<td>Youth Campaign</td>
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<td>Atlanta</td>
<td>GA</td>
<td>30305</td>
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<td>(c) IRC section if applicable</td>
<td>(d) Amount of cash grant</td>
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<tr>
<td>Tigers Unlimited Foundation</td>
<td>302 South Donahue Drive</td>
<td>Auburn</td>
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<td>(b) EIN</td>
<td>(c) IRC section if applicable</td>
<td>(d) Amount of cash grant</td>
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**Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

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<th>Type of grant or assistance</th>
<th>Number of recipients</th>
<th>Amount of cash grant</th>
<th>Method of valuation</th>
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**Part IV Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

**PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S.**

The Community Foundation of Central Georgia conducts due diligence on all potential grantees to ensure the eligibility for application or receipt of funds, the tax exemption of the organization, the charitable nature of the organization, the charitable nature of the grant request, and the financial health and reputation of the organization. Site visits are conducted on a regular basis to review an organization and its programs; especially if an organization is new, or if the organization has not previously been awarded a grant from CFCG. Telephone inquiries are also made on a regular basis to obtain current information on the organization as part of due diligence. Prior to funds being disbursed to a potential grantee organization, requests for disbursement must be approved by the Executive Committee or the Board of
PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S. (CONTINUED)

DIRECTORS OF CFCG.

AFTER APPROVAL, GRANTEES RECEIVE THEIR GRANT PAYMENT ALONG WITH AN AWARD LETTER SPECIFICALLY STATING HOW THE FUNDS ARE TO BE USED. FINAL REPORTS ON HOW THE GRANT FUNDS WERE USED ARE REQUIRED FOR ALL GRANTS FROM NONPROFIT, NEIGHBORHOOD, DOWNTOWN CHALLENGE GRANT PROGRAMS. FINAL REPORTS MAY ALSO BE REQUIRED FOR ANY GRANTS FROM A DONOR ADVISED, ORGANIZATIONAL ENDOWMENT, SCHOLARSHIP OR DESIGNATED FUND IF SO REQUESTED BY THE DONOR.

IN ADDITION TO THE ABOVE, IF, IN THE DUE DILIGENCE PROCESS, AN ORGANIZATION IS FOUND TO REQUIRE EXPENDITURE RESPONSIBILITY BASED ON THE FUND TYPE OR THE ORGANIZATION'S TAX EXEMPT STATUS, CFCG STAFF DETERMINES IF THE PROJECT HAS A CHARITABLE MISSION. IF SO, AND IF THE BOARD OF DIRECTORS APPROVES MAKING THE GRANT, STAFF DEVELOPS A GRANT AGREEMENT TO PRESENT TO THE RECIPIENT ORGANIZATION. GRANTS TO THESE ORGANIZATIONS ARE MADE WHEN THE AGREEMENT HAS BEEN SIGNED BY BOTH PARTIES. ALL GRANTS REQUIRING EXPENDITURE RESPONSIBILITY REQUIRE FINAL REPORTS ONCE THE PROJECT IS COMPLETE.
### Part I: Questions Regarding Compensation

1. Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
   - [ ] First-class or charter travel
   - [ ] Travel for companions
   - [ ] Tax indemnification and gross-up payments
   - [X] Discretionary spending account
   - [ ] Housing allowance or residence for personal use
   - [ ] Payments for business use of personal residence
   - [ ] Health or social club dues or initiation fees
   - [ ] Personal services (e.g., maid, chauffeur, chef)

2. Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?
   - [ ] Yes
   - [X] No

3. Indicate which, if any, of the following filing organization used to establish the compensation of the organization’s CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.
   - [ ] Compensation committee
   - [X] Independent compensation consultant
   - [X] Form 990 of other organizations
   - [ ] Written employment contract
   - [X] Compensation survey or study
   - [X] Approval by the board or compensation committee

4. During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:
   - [X] Receive a severance payment or change-of-control payment?
   - [X] Participate in, or receive payment from, a supplemental nonqualified retirement plan?
   - [X] Participate in, or receive payment from, an equity-based compensation arrangement?
   - [ ] Any related organization?

   If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

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

5. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:
   - [X] The organization?
   - [ ] Any related organization?

   If 'Yes' to line 5a or 5b, describe in Part III.

6. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:
   - [X] The organization?
   - [ ] Any related organization?

   If 'Yes' on line 6a or 6b, describe in Part III.

7. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If 'Yes,' describe in Part III.
   - [ ] Yes
   - [X] No

8. Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)?
   - [X] Yes
   - [ ] No

9. If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?
   - [X] Yes
   - [ ] No
Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Breakdown of W-2 and/or 1099-MISC compensation</th>
<th>(C) Retirement and other deferred compensation</th>
<th>(D) Nontaxable benefits</th>
<th>(E) Total of columns (B)(i)-(D)</th>
<th>(F) Compensation in column (B) reported as deferred on prior Form 990</th>
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<td>(i) 0 (ii) 0</td>
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<td>15</td>
<td>(i) 0 (ii) 0</td>
<td>(i) 0 (ii) 0</td>
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<tr>
<td>Part III</td>
<td>Supplemental Information</td>
<td></td>
<td></td>
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<td>----------</td>
<td>--------------------------</td>
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</tr>
<tr>
<td>Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.</td>
<td></td>
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</table>
## Noncash Contributions

### Part I  Types of Property

<table>
<thead>
<tr>
<th></th>
<th>(a) Check if applicable</th>
<th>(b) Number of contributions or items contributed</th>
<th>(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g</th>
<th>(d) Method of determining noncash contribution amounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Art — Works of art</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>2</td>
<td>Art — Historical treasures</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>3</td>
<td>Art — Fractional interests</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Books and publications</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>5</td>
<td>Clothing and household goods</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>6</td>
<td>Cars and other vehicles</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Boats and planes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Intellectual property</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Securities — Publicly traded</td>
<td>X</td>
<td>77</td>
<td>1,915,159.</td>
</tr>
<tr>
<td>10</td>
<td>Securities — Closely held stock</td>
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<tr>
<td>11</td>
<td>Securities — Partnership, LLC, or trust interests</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Securities — Miscellaneous</td>
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<tr>
<td>13</td>
<td>Qualified conservation contribution — Historic structures</td>
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<tr>
<td>14</td>
<td>Qualified conservation contribution — Other</td>
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<tr>
<td>15</td>
<td>Real estate — Residential</td>
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<tr>
<td>16</td>
<td>Real estate — Commercial</td>
<td>X</td>
<td>1</td>
<td>495,461.</td>
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<tr>
<td>17</td>
<td>Real estate — Other</td>
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<tr>
<td>18</td>
<td>Collectibles</td>
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<td>19</td>
<td>Food inventory</td>
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<td>20</td>
<td>Drugs and medical supplies</td>
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<td>21</td>
<td>Taxidermy</td>
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<tr>
<td>22</td>
<td>Historical artifacts</td>
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<tr>
<td>23</td>
<td>Scientific specimens</td>
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<tr>
<td>24</td>
<td>Archeological artifacts</td>
<td></td>
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<tr>
<td>25</td>
<td>Other ▶ (</td>
<td></td>
<td></td>
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<tr>
<td>26</td>
<td>Other ▶ (</td>
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<tr>
<td>27</td>
<td>Other ▶ (</td>
<td></td>
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</tr>
<tr>
<td>28</td>
<td>Other ▶ (</td>
<td></td>
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</tr>
</tbody>
</table>

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donor Acknowledgement. .................................................................................................................. 29

### 30a
During the year, did the organization receive by contribution any property reported in Part I. lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
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</thead>
<tbody>
<tr>
<td>30a</td>
<td></td>
<td>X</td>
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</tbody>
</table>

b If ‘Yes,’ describe the arrangement in Part II.

### 31
Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
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</thead>
<tbody>
<tr>
<td>31</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

### 32a
Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
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</thead>
<tbody>
<tr>
<td>32a</td>
<td></td>
<td>X</td>
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</tbody>
</table>

b If ‘Yes,’ describe in Part II. 32b

### 33
If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II. 33

SEE PART II

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.
PART I, LINE 32 - HIRE AND USE OF THIRD PARTIES

THE FOUNDATION USES STOCK BROKERS TO HANDLE THE SALE OF CONTRIBUTED PUBLICLY TRADED SECURITIES AND LICENSED REAL ESTATE AGENTS TO SELL CONTRIBUTED REAL ESTATE.
FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECTORS, ETC.

RUTH A. KNOX IS EMPLOYED BY WESLEYAN COLLEGE AND JULIA G. BALDWIN AND ROBERT F. HATCHER, JR. SERVE AS MEMBERS OF THE BOARD OF TRUSTEES OF WESLEYAN COLLEGE.

RONNIE D. ROLLINS IS EMPLOYED BY COMMUNITY HEALTH SYSTEMS, INC. AND KATHRYN H. DENNIS SERVES AS A MEMBER OF THE BOARD OF COMMUNITY HEALTH SYSTEMS, INC.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS


A COPY OF THE FORM 990 IS THEN PROVIDED ELECTRONICALLY TO EACH BOARD MEMBER. AT THE REGULARLY SCHEDULED MEETING OF THE BOARD OF DIRECTORS, THE EXECUTIVE VICE PRESIDENT PRESENTS HIGHLIGHTS OF THE RETURN AND IS AVAILABLE TO ANSWER ANY QUESTIONS OR CONCERNS THAT DIRECTORS MAY HAVE. WHEN THIS PRESENTATION IS SUCCESSFULLY COMPLETED, THE FORM 990 IS FILED.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

BOARD AND STAFF MEMBERS COVERED BY THE CONFLICT OF INTEREST POLICY ARE REQUIRED TO DISCLOSE CONFLICTS OF INTEREST ANNUALLY BY COMPLETING A QUESTIONNAIRE LISTING THE ORGANIZATIONS THEY OR THEIR SPOUSE SERVE, ARE EMPLOYED BY, OR WITH WHICH THEY HAVE A BUSINESS RELATIONSHIP.

ANNUALLY, COVERED INDIVIDUALS ARE ALSO REQUIRED TO SIGN A STATEMENT INDICATING THEY HAVE RECEIVED A COPY OF THE POLICY, HAVE READ AND UNDERSTAND IT, AGREE TO COMPLY WITH
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS (CONTINUED)

THE POLICY, AND AGREE TO DISCLOSE A POTENTIAL CONFLICT PRIOR TO PARTICIPATING IN ANY RELATED DELIBERATIONS OR MAKING ANY RELATED DECISIONS. IF THE BOARD DETERMINES THAT THERE IS A CONFLICT OR THE APPEARANCE OF A CONFLICT, THE INDIVIDUAL AGREES TO ABSTAIN FROM VOTING AND WILL NOT PARTICIPATE IN THE DISCUSSIONS OTHER THAN TO PROVIDE INFORMATION OF A TECHNICAL NATURE OR ANSWER SPECIFIC QUESTIONS THAT MAY BE RAISED BY OTHER BOARD MEMBERS.

CONFLICTS OF INTEREST BROUGHT TO THE ATTENTION OF THE BOARD OR ITS COMMITTEES DURING MEETINGS ARE IDENTIFIED IN THE OFFICIAL MINUTES OF THAT MEETING.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT

THE PRESIDENT IS THE TOP MANAGEMENT OFFICIAL OF THE COMMUNITY FOUNDATION. SHE RECEIVES A PERFORMANCE AND COMPENSATION REVIEW FROM THE CHAIR AND THE TREASURER OF THE BOARD OF DIRECTORS. THEY DETERMINE COMPENSATION BASED ON PERFORMANCE AND ON THE RESULT OF COMPARISONS WITH COMPENSATION OF OTHERS IN SIMILAR POSITIONS TO DETERMINE IF HER COMPENSATION IS FAIR AND REASONABLE.

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS - OFFICERS & KEY EMPLOYEES

EXECUTIVE VICE PRESIDENT RECEIVES A PERFORMANCE REVIEW FROM THE PRESIDENT. HER COMPENSATION IS DETERMINED BY THE PRESIDENT BASED UPON THE PERFORMANCE REVIEW AND WITHIN THE BUDGETARY GUIDELINES APPROVED BY THE BOARD OF DIRECTORS. AS PART OF THIS PROCESS VARIOUS OUTSIDE SALARY SURVEYS ARE USED TO ASSIST IN DETERMINING ANY ADJUSTMENTS.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

THE GOVERNING DOCUMENTS, AUDITED FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, AND THE FORM 990 ARE AVAILABLE TO THE PUBLIC ONLINE AT WWW.CFCGA.ORG (THE FOUNDATION'S WEBSITE).
## FORM 990, PART XI, LINE 9
### OTHER CHANGES IN NET ASSETS OR FUND BALANCES

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASC BOOK/TAX DIFFERENCE - EXPENSES</td>
<td>$893,651.</td>
</tr>
<tr>
<td>ASC BOOK/TAX DIFFERENCE - REVENUES</td>
<td>-$863,672.</td>
</tr>
<tr>
<td>CHANGE IN SPLIT INTEREST TRUSTS</td>
<td>$41,558.</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>$71,537.</strong></td>
</tr>
</tbody>
</table>
**Part I** Identification of Disregarded Entities
Complete if the organization answered 'Yes' on Form 990, Part IV, line 33.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN (if applicable) of disregarded entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Total income</th>
<th>(e) End-of-year assets</th>
<th>(f) Direct controlling entity</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. CFCG HOLDINGS LLC, 577 MULBERRY STREET STE 1600, MACON, GA 31201, 58-2053465</td>
<td>REAL ESTATE HOLDINGS</td>
<td>GA</td>
<td>0</td>
<td>0</td>
<td>CFCG INC</td>
</tr>
<tr>
<td>2. CFCG JENNIFER DR LLC, 577 MULBERRY STREET STE 1600, MACON, GA 31201, 58-2053465</td>
<td>REAL ESTATE HOLDINGS</td>
<td>GA</td>
<td>0</td>
<td>242,000</td>
<td>CFCG HOLDINGS LLC</td>
</tr>
<tr>
<td>3. DOVER HALL TRACT 100 LLC, 577 MULBERRY STREET STE 1600, MACON, GA 31201, 58-2053465</td>
<td>REAL ESTATE HOLDINGS</td>
<td>GA</td>
<td>0</td>
<td>680,000</td>
<td>CFCG HOLDINGS LLC</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Exempt Code section</th>
<th>(e) Public charity status (if section 501(c)(3))</th>
<th>(f) Direct controlling entity</th>
<th>(g) Sec 512(b)(13) controlled entity?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
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<tr>
<td>2.</td>
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<td></td>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
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<tr>
<td>3.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
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<tr>
<td>4.</td>
<td></td>
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<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
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</tbody>
</table>
### Part III  
**Identification of Related Organizations Taxable as a Partnership**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) General or managing partner?</th>
<th>(j) Percentage ownership</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
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<td>(2)</td>
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<td></td>
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<td></td>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
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<tr>
<td>(3)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Type of entity (C corp, S corp, or trust)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Percentage ownership</th>
<th>(i) Sec 512(b)(13) controlled entity?</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
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<td></td>
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<td>Yes</td>
<td>No</td>
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<td>Yes</td>
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<td>(3)</td>
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<td></td>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>
**Part V Transactions With Related Organizations** Complete if the organization answered 'Yes' on Form 990, Part IV, line 34, 35b, or 36.

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

<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
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</tbody>
</table>

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

<table>
<thead>
<tr>
<th>(a) Name of related organization</th>
<th>(b) Transaction type (a-s)</th>
<th>(c) Amount involved</th>
<th>(d) Method of determining amount involved</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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<td>6</td>
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</tbody>
</table>
## Part VI  Unrelated Organizations Taxable as a Partnership

Complete if the organization answered ‘Yes’ on Form 990, Part IV, line 37.

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

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(e) Are all partners section 501(c)(3) organizations?</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
</tr>
</thead>
<tbody>
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BAA
Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions).