Form **990** (Rev. January 2020)

EXTENDED TO NOVEMBER 16, 2020

Return of Organization Exempt From Income Tax

Open to Public

OMB No. 1545-0047

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. Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990 for instructions and the latest information.

4	\ F	or th	e 2019 calendar year, or tax year beginning	an	d ending		
E	3 C	heck (f	C Name of organization		<u> </u>	D Employer identifi	cation number
		Addre	ONE COLUMBUS				
	X	Name				27-15091	90
Ì	Γ=	Initial		elivered to street address)	Room/su		
		Final	150 COTIME PRONT CORPER	614-225-			
		termi ated	City or town, state or province, country, and	ZIP or foreign postal code		G Gross receipts \$	6,757,341.
- 1		Amer return	CONOMBOS, OH 43713			H(a) Is this a group n	etum
-		Appli tion pend		INY MCDONALD		for subordinates	? Yes X No
_		perc	SAME AS C ABOVE			H(b) Are all subordinates in	
_!) ◀ (insert no.) 4947(a)(1	I) or :		list. (see instructions)
•			te: HTTP://COLUMBUSREGION.		- 	H(c) Group exemptio	
		rt I	forganization; X Corporation Trust A Summary	ssociation Other	I IL Y	ear of formation; 2009	M State of legal domicile; OH
_ L	<u> </u>		Briefly describe the organization's mission or most	A - I - William A - A - A - A - A - CPF	CCUPI	NITE O	
2	8	1	bneny describe the organization s mission or most	t significant activities: SEE	SCHEL	JOHE O	
0	Activities & Governance	2	Check this box if the organization disco	nataus no or den	anad at a	om then 25% of its not see	note .
	ğ	3	Number of voting members of the governing body		OSEO PRE	ore than 35% per its net ass	16
	8	4	Number of independent voting members of the go	· I		0 4 0 4	15
	8	5	Total number of individuals employed in calendar	11~	-1 1101	/ n e 2021 915	0
	\$	6	Total number of volunteers (estimate if necessary)	· IC	9	0 6 2021	16
	쥥	7 a	Total unrelated business revenue from Part VIII, co	i i			0.
_	4	ь	Net unrelated business taxable income from Form	990-T, line 39	OG	DEN, UT	0.
	-		ļ	RECEIVED		Prior Year	Current Year
7,	g	8	Contributions and grants (Part VIII, line 1h)	1/2 1/2	ļ. ļ	6,533,039.	6,745,511.
7707	Revenue	9	Program service revenue (Part VIII, line 2g)	NO. 2 3 2020 2		0.	0.
0	3	10	Investment income (Part VIII, column (A), lines 3 4			508.	509.
4	-	11	Other revenue (Part VIII, column (A), lines 5, 6d, 6d	:,9c,10c, and 11a)	-	1,707.	11,321.
¥-	-+	12	Total revenue - add lines 8 through 11 (must equal	<u>, </u>		6,535,254.	6,757,341.
MAK	Ì	13	Grants and similar amounts paid (Part IX, column (-	355,000. 0.	325,000.
		14 15	Benefits paid to or for members (Part IX, column & Salaries, other compensation, employee benefits (I	· ·	H	0.	0.
ANNED	8		Professional fundraising fees (Part IX, column (A), I		-	0.	0.
Z	ĕ		Total fundraising expenses (Part IX, column (D), lin		0.		
Z	핇		Other expenses (Part IX, column (A), lines 11a-11d			7,865,495.	8,010,726.
め			Total expenses. Add lines 13-17 (must equal Part I			8,220,495.	8,335,726.
ŔŃ		19	Revenue less expenses. Subtract line 18 from line	12		-1,685,241.	-1,578,385.
σ_{i}	5 %				I	Beginning of Current Year	End of Year
œ {	羂	20	Total assets (Part X, line 16)			1,928,725.	2,479,942.
	찈		Total liabilities (Part X, line 26)	•	-	7,083,611.	9,207,386.
75			Net assets or fund balances Subtract line 21 from	line 20		-5,154,886.	-6,727,444.
		rt II	Signature Block			44-44-4	
			ulties of perjury, I declare that I have examined this return, it, and complete. Declaration of preparer (other than office				knowledge and belief, it is
حق			L COLLEGE CONTROL OF PROPERTY COLLEGE CONTROL	or y to best a or all internation of a	инон ргора	1///2	72.
2	ign		Signature of officer			Date	<u> </u>
77	ere)	SEAN GRANT, CHIEF ADMII	NISTRATIVE OFFI	CER		
_			Type or print name and title				
			Print/Type preparer's name	Preparer's signature		Date Check	PTIN
)	eid			T.J. CONGER, CP	A	11/13/20 self-employe	
P	repa	rer	Firm's name JOHN GERLACH & C			Firm's EIN	31-4419361
U	88 C	nly	Firm's address > 37 W BROAD ST ST				
_		44. 27	COLUMBUS, OH 432			Phone no. 6 1	4-224-2164
			3S discuss this return with the preparer shown abo		 	·	Yes No Form 990 (2019)
193	3200	1 01-2	0-20 LHA For Paperwork Reduction Act Notice	o, see uie separate matructi	ons.	(-120	Form 350 (2019)
						51.71	•

Form 990 (2019) ONE COLUMBUS [Part | V] Checklist of Required Schedules

f.T.				
			Yes	No
ì	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	ļ
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	١.		
	public office? If "Yes," complete Schedule C, Part I	3_	-	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
_	during the tax year? If "Yes," complete Schedule C, Part II	4		-
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	5	Х	•
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	-		
6	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	۳		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." complete			
_	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		7,	
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			v
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	-	X
C	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	_X_	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>X</u>
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F. Parts I and IV	146		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
_	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		<u>X</u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u> </u>
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	_20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	ا . ـ ا	.,	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	

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Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No," go to line 25a	24a		<u> </u>
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	Ī	
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
_	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
21	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
20	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			 -
28	instructions, for applicable filing thresholds, conditions, and exceptions)			
_				
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	28a	х	
	"Yes," complete Schedule L, Part IV	28b		x
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	200		<u> </u>
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? f	28c		x
	"Yes," complete Schedule L, Part IV	-		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	30		x
	contributions? If "Yes," complete Schedule M			X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		┝┷
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			x
	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	۱	v	
	Part V, line 1	34	X	-
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			İ
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			İ
	If "Yes," complete Schedule R, Part V, line 2	36		\vdash
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	-	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	l	7,	
Des	Note: All Form 990 filers are required to complete Schedule O	38	X	Щ_
Pa				(T F)
_	Check if Schedule O contains a response or note to any line in this Part V			X
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 28			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
932004	4 01-20-20	Form	220	(2019)

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ra	Tt V Statements Regarding Other IRS Filings and Tax Compliance (continued)							
			Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	ļ						
	filed for the calendar year ending with or within the year covered by this return	ļ		 				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	-	├				
_	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			<u> </u>				
3a	great and a figure	3a 3b	_	X				
	b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			x				
h	If "Yes," enter the name of the foreign country	4a		├^				
~	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)							
5a	· · ·	5a		X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X				
С	Arms and a second secon	5c						
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit							
	any contributions that were not tax deductible as charitable contributions?	6a	X					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			İ				
	were not tax deductible?	6b	<u> </u>	<u> </u>				
7	Organizations that may receive deductible contributions under section 170(c).							
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		<u> </u>				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		-				
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	_		ĺ				
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	7c		 				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	_					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f						
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the							
	sponsoring organization have excess business holdings at any time during the year?	8						
9	Sponsoring organizations maintaining donor advised funds.							
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a						
ь	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		 ,				
10	Section 501(c)(7) organizations. Enter			ļ				
a	Initiation fees and capital contributions included on Part VIII, line 12	1	i					
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter	ŀ		.				
a	Gross income from members or shareholders		[- 1				
_	Gross income from other sources (Do not net amounts due or paid to other sources against							
	amounts due or received from them.)		ı	ļ				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			\neg				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state?	13a						
	Note: See the instructions for additional information the organization must report on Schedule O	1		ſ				
b	Enter the amount of reserves the organization is required to maintain by the states in which the							
	organization is licensed to issue qualified health plans	i		ľ				
C	Enter the amount of reserves on hand							
14a	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes " has it filed a Form 720 to report these payments?" (* "Yes " has it filed a Form 720 to report these payments?" (* "Yes " has it filed a Form 720 to report these payments?")	14a		<u> </u>				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	\dashv					
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	.		v				
	If "Yes," see instructions and file Form 4720, Schedule N	15	\dashv	<u> </u>				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	—- ·	$\overline{\mathbf{x}}$				
	If "Yes," complete Form 4720, Schedule O			<u> </u>				
		Form	990 (2019)				

ONE COLUMBUS 27-1509190 Form 990 (2019) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI \mathbf{X} Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year 16 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 15 b Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision X of officers, directors, trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8ь Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a X b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X in Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 13 X Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X a The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶OH Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Another's website Other (explain on Schedule O) X Upon request Own website Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records SEAN GRANT, CHIEF ADMINISTRATIVE OFFICER - 614-225-6931 150 S. FRONT ST., STE. 200, COLUMBUS, OH

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Form **990** (2019)

Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See 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

 See instructions for the order in which to list the persons above

(A)	(B)				()			(D)	(E)	(F)
Name and title	Average	(do	not c	Posi			ne	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	son ı	s both	an	compensation	compensation	amount of
	week	-	cer an	aaa	recto	liveus	90)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for related	D TO a	e e			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	ruste	d trus		yee	m pen		(***2/1033***********************************		and related
	below	Individual trustee or director	Institutional trustee	Ε.	Кеу етрюуее	st co	ы			organizations
	line)		Instit	Officer	Key e	Highest compensated employee	Рогте г			
(1) PABLO VEGAS	1.00					,				
CHAIRMAN OF THE BOARD	1.00	Х		X				0.	0.	0.
(2) GREG OVERMYER	1.00									
FINANCE CHAIR	1.00	X		X		\Box		0.	0.	0.
(3) ERIC PHILLIPS	1.00	1				li				
SECRETARY	1.00	X		X		Ш		0.	0.	0.
(4) ALEX FISCHER	1.00	ļ								
DIRECTOR	1.00	X	Щ			Ш		0.	0.	0.
(5) MICHAEL LOUGE	1.00								_	_
DIRECTOR	1.00	X						0.	0.	0.
(6) CORRINE BURGER	1.00									
DIRECTOR	1.00	X						0.	0.	0.
(7) MARILYN BROWN	1.00							_	_	_
DIRECTOR	1.00	Х	Ш					0.	0.	0.
(8) MARK BERVEN	1.00							_	_	_
DIRECTOR	1.00	Х						0.	0.	0.
(9) ANDREW GINTHER	1.00									
DIRECTOR	1.00	X	Щ	_				0.	0.	0.
(10) DR. DAVID WILLIAMS	1.00		Ιİ						•	
DIRECTOR	1.00	X	Ш	\dashv				0.	_0.	0.
(11) RAJA SUNDERARARAJAN	1.00			ı					_	•
DIRECTOR	1.00	X	Ш	_		_		0.	0.	0.
(12) ROBERT SCHOTTENSTEIN	1.00							0		•
DIRECTOR	1.00	X	Н					0.	0.	0.
(13) TOM SCHOUPE	1.00	v						0.	0.	0
DIRECTOR	1.00	X	Н	\dashv				U •	0.	0.
(14) MARK SMOLIK	1.00	x						0.	0.	0.
DIRECTOR (15) SUE ZAZON	1.00	<u> </u>						0.	- 0.	
DIRECTOR	1.00	x		ļ				0.	0.	0.
(16) AARON PITTS	1.00	<u>^</u>	$\vdash \vdash$	\dashv		-	-	U .	0.	<u> </u>
	1.00	х			i			0.	0.	0.
DIRECTOR		47		- 1				· · · · · · · · · · · · · · · · · · ·	J • [U •
DIRECTOR (17) KENNY MCDONALD	1.00		П							

932007 01-20-20

Form **990** (2019)

Part VII Section A. Officers, Directors, T	(B)	I	ees,		<u>, m</u>	gnes	<u>, (</u>	(D)	(E)		(F)
Name and title	Average hours per week	box	not c	Pos heck ss pe	ition more rson i	than out the state of the state	n an	Reportable compensation from	Reportable compensation from related	on	Estimated amount of other
	(list any hours for related organizations below line)	ndividual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the	organization (W-2/1099-MIS	ıs	compensation from the organization and related organizations
(18) SEAN GRANT	1.00	<u> </u>	_		Ť		Ī				
CHIEF ADMINISTRATIVE OFFICER	1.00	_		Х			-	0.		0.	0.
					<u> </u>						
			-								
Subtotal Total from continuation sheets to Part	t VII, Section A						▶	0.		0.	0.
d Total (add lines 1b and 1c)	.t. not limited to the		lioto) w/b	<u> </u>	0.	000 of reportable	0.	0.
2 Total number of individuals (including but compensation from the organization		ose	uste	u ac	ove	:) WII	o re	eceived more than \$100,	ooo or reportable	;	0
 											Yes No
3 Did the organization list any former office		ee, k	ey e	mpl	oye	e, or	hıg	hest compensated empl	oyee on		3 X
line 1a? If "Yes," complete Schedule J for any individual listed on line 1a, is the		e co	mpe	ensa	tion	and	oth	ner compensation from the	ne organization	ŀ	3 X
and related organizations greater than \$	•							•	3.	Ī	4 X
5 Did any person listed on line 1a receive									lual for services		
rendered to the organization? If "Yes." o	complete Schedule	e <i>J f</i> (or su	ich į	oers	on					5 X
Complete this table for your five highest	compensated ind	lepe	nder	nt co	ontra	actor	s th	nat received more than \$	100 000 of com	ensat	on from
the organization Report compensation	="	-							•	7004	
(A) Name and busine	ess address							(B) Description of s	ervices	С	(C) ompensation
NUGROWTH SOLUTIONS, LLC								BUSINESS DEVI	ELOPMENT		
4181 ARLINGATE PLAZA, C	OLUMBUS,	OH	4	32	<u> 28</u>		-	SERVICE			171,177.
	-						\dashv		<u>-</u> .		

Total number of independent contractors (including but not limited to those listed above) who received more than

932008 01-20-20

Form **990** (2019)

\$100,000 of compensation from the organization

ONE COLUMBUS Form 990 (2019) Page 9 Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) Related or exempt Unrelated Revenuè excluded Total revenue from tax under function revenue business revenue sections 512 - 514 1a Federated campaigns 1b **b** Membership dues 1c c Fundraising events 1d d Related organizations 1,801,200. Government grants (contributions) All other contributions, gifts, grants, and 4,944,311 similar amounts not included above Q Noncash contributions included in lines 1a-1f 6,745,511 h Total. Add lines 1a-1f **Business Code** 2 a All other program service revenue Total. Add lines 2a-2f Investment income (including dividends, interest, and 509. 509. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (II) Personal 6 a Gross rents 6a 6b **b** Less rental expenses Rental income or (loss) d Net rental income or (loss) (i) Securities (iı) Other 7 a Gross amount from sales of assets other than inventory **b** Less cost or other basis and sales expenses 7b Other Revenue c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ _ contributions reported on line 1c) See Part IV, line 18 **b** Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 **b** Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances 10Ы b Less cost of goods sold c Net income or (loss) from sales of inventory **Business Code** 11 a MISCELLANEOUS INCOME 900099 11,321 d All other revenue 11,321 e Total. Add lines 11a-11d 757,341.

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Total revenue. See instructions

Form 990 (2019) ONE COLUMBUS Part IX Statement of Functional Expenses

`.	Check if Schedule O contains a respon			1 (0)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	325,000.			
2	Grants and other assistance to domestic				
	ındıvıduals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				;·
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages			ļ	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees)				
а	Management	3,901,050.			
b	Legal	46,231.			
C	Accounting	18,900.			
	Lobbying				
е	Professional fundraising services. See Part IV, line 17			ļ.	
f	Investment management fees				
g	•	E2 055			
	column (A) amount, list line 11g expenses on Sch O.)	73,257.			
12	Advertising and promotion	1,031,230.			
13	Office expenses	166,784.			
14	Information technology	152,924.			
15	Royalties	100 005			
16	Occupancy	193,295.			. =::
17	Travel	296,987.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	EAC 750			
19	Conferences, conventions, and meetings	546,752.			
20	Interest	22,028.		_	
21	Payments to affiliates	75 046			
22	Depreciation, depletion, and amortization	75,946.			
23	Insurance			 	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				, , , , , , , , , , , , , , , , , , ,
_	INDEPENDENT SERVICES	1,186,810.			
	DIVIDA & GUDAGDIDATONA	246,558.		-	
	MISCELLANEOUS	27,206.			
c d	FEDERAL EXCISE TAX	15,113.	_		1
	All other expenses	9,655.	<u></u>		· · · · · · · · · · · · · · · · · · ·
е 25	Total functional expenses. Add lines 1 through 24e	8,335,726.			
<u>25</u> 26	Joint costs. Complete this line only if the organization	3,000,1200		<u> </u>	
£U	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here figure of following SOP 98-2 (ASC 958-720)				
	a remaining day as a contract read			*·	5 990 (0010)

Dart Y.	Balance Sheet	
Tail A	Dalalice Sheet	

		Check if Schedule O contains a response or note to any line in this Part X	.		
`			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		_3	
	4	Accounts receivable, net	1,331,767.	4	1,306,777
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			·
		controlled entity or family member of any of these persons	 	5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	·	6	
s	7	Notes and loans receivable, net		7	· · · · · · · · · · · · · · · · ·
Assets	8	Inventories for sale or use		8	
Ÿ	9	Prepaid expenses and deferred charges	147,768.	9	132,887
	10a	Land, buildings, and equipment cost or other			
		basis Complete Part VI of Schedule D 10a 1,744,521.	240 500		000 (10
	b	Less accumulated depreciation 10b 904,904.	348,529.	10c	839,617
	11	Investments - publicly traded securities		11	
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets	100 661	14	000 661
	15	Other assets See Part IV, line 11	100,661.	15	200,661
	16	Total assets. Add lines 1 through 15 (must equal line 33)	1,928,725.	16	2,479,942
	17	Accounts payable and accrued expenses	432,255.	17	1,152,257
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
S	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
ge		controlled entity or family member of any of these persons	F22 42C	22	425 216
-	23	Secured mortgages and notes payable to unrelated third parties	532,436.	23	425,216
	24	Unsecured notes and loans payable to unrelated third parties	· · · · · · · · · · · · · · · · · · ·	24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X	6 110 020		7,629,913
		of Schedule D	6,118,920. 7,083,611.	25	9,207,386
_	_26	Total liabilities. Add lines 17 through 25	7,003,011.	26	9,201,300
s		Organizations that follow FASB ASC 958, check here			
Jce		and complete lines 27, 28, 32, and 33.	-5,194,886.		-7,177,194
alar	27	Net assets without donor restrictions	40,000.	27	449,750
ã	28	Net assets with donor restrictions	40,000.	28	449,130
Š		Organizations that do not follow FASB ASC 958, check here			
-		and complete lines 29 through 33.		<u> </u>	
2	29	Capital stock or trust principal, or current funds		29	
SSE	30	Paid-in or capital surplus, or land, building, or equipment fund	· ·	30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds	E 154 00C	31	_6 727 444
Š	32	Total net assets or fund balances	-5,154,886. 1,928,725.	32	-6,727,444
_	33	Total liabilities and net assets/fund balances	1,740,745.	33	2,479,942 Form 990 (201

	1990 (2019) ONE COLUMBUS	<u> 27-</u>	<u> 1509190 </u>	Page 12
'Pa	Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			
٠		l i		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,757	,341.
2	Total expenses (must equal Part IX, column (A), line 25)	2		726.
3	Revenue less expenses. Subtract line 2 from line 1	3	-1, <u>57</u> 8	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	-5,154	,886.
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8	5	,827.
9	Other changes in net assets or fund balances (explain on Schedule O)	9		0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32,	1		
	column (B))	10	<u>-6,727</u>	,444.
[Pa	t'XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			<u> </u>
				Yes No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a		
	separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?		2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,		1[
	consolidated basis, or both			
	Separate basis X Consolidated basis Both consolidated and separate basis		الكاكا	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audıt,	1 1	
	review, or compilation of its financial statements and selection of an independent accountant?		2c	<u>X</u>
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch			
3a	, ,	gle Audı	1 1	
	Act and OMB Circular A-133?		3a	<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit	1 (
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	
			Form	990 (2019)

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

2019
Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

•	Section 6	601(c)(4), (5), or (6) organiza	tions Complete Part III				
	ne of orga		tions Complete Fart III		T F	mploy	yer identification number
		ONE COL	IIMRIIS		-		27-1509190
iPa	rtil-A	Complete if the ord	ganization is exempt und	er section 501(c)	or is a section 527	oras	nization.
124-	<u> المتعدد ب</u>		,			0.90	
1	Provide	a description of the organi-	zation's direct and indirect politic	cal campaign activities	in Part IV		
		campaign activity expendit	•	cai campaign activities		•	
		er hours for political campa			'	- • _	····
Ŭ	VOIGITIE	or modes for political campa	ight activities			-	
Pa	rtil:B	Complete if the org	janization is exempt und	ler section 501(c)(3).		
1	Enter th		incurred by the organization uni			▶\$_	
2	Enter th	e amount of any excise tax	incurred by organization manag	ers under section 4955		▶ \$_	
3	If the or	ganization incurred a sectio	n 4955 tax, did it file Form 4720	for this year?		_	Yes No
4a	Was a c	orrection made?					Yes No
b	If "Yes,"	describe in Part IV					
<u> Pa</u>	rtil-C	Complete if the org	janization is exempt und	ler section 501(c),	except section 50	11(c)(3	3).
1	Enter the	e amount directly expended	by the filing organization for se	ection 527 exempt funct	tion activities	▶ \$_	
2	Enter the	e amount of the filing organ	ization's funds contributed to of	ther organizations for se	ection 527		
	exempt	function activities			J	▶ \$_	
3	Total ex	empt function expenditures	Add lines 1 and 2 Enter here a	and on Form 1120-POL,	i		
	line 17b				,	▶\$_	
4	Did the t	iling organization file Form	1120-POL for this year?				Yes No
5	Enter the	e names, addresses and en	nployer identification number (El	N) of all section 527 po	litical organizations to w	hich th	ne filing organization
			tion listed, enter the amount pai				
			omptly and directly delivered to			arate s	egregated fund or a
	political	action committee (PAC) If	additional space is needed, prov	vide information in Part	IV		
		(a) Name	(b) Address	(c) EIN	(d) Amount paid fro	om	(e) Amount of political
					filing organization's		contributions received and
					funds. If none, enter	-0-	promptly and directly delivered to a separate
							political organization
							If none, enter -0-
				<u>.</u>			
		ï					
				- 		\rightarrow	
		 -	<u> </u>	_	 		
				<u> </u>	<u> </u>	_	
	_						

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

Schedule C (Form 990 or 990-EZ) 2019

LHA

932041 11-26-19

Schedule C (Form 990 or 990-EZ) 2019 (Part II-A Complete if the organization	ONE C	OLUMBU	S not under section	501(c)(3) and file	27 - 1 d Form 5768 (el	1509190 Page 2
section 501(h)).	amzauc	JII IS EXEI	iipi uiluei sectioi	1 30 No)(3) and the	a i oi iii 3700 (ei	ection under
	ion belon	gs to an affi	liated group (and list in	n Part IV each affiliated	group member's nan	ne, address, EIN,
expenses, and share	of exces	ss lobbying e	expenditures)			
B Check if the filing organizat	ion check	red box A ar	nd "limited control" pro	ovisions apply		
		bying Exper	nditures ints paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ence pub	lic opinion (grassroots lobbying)	<u></u>	 	-
b Total lobbying expenditures to influ	•					
c Total lobbying expenditures (add lin		-	, (,,			
d Other exempt purpose expenditure.		,				
e Total exempt purpose expenditures		s 1c and 1d	١			
f Lobbying nontaxable amount Enter				h columns		
If the amount on line 1e, column (a) or			bying nontaxable am	11		10
Not over \$500,000	10710,	1	the amount on line 1e			9 14 14 19 19 19 19 19 19 19 19 19 19 19 19 19
Over \$500,000 but not over \$1,000	000	î e	00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,50			00 plus 10% of the exc			
Over \$1,500,000 but not over \$1,00		1	00 plus 5% of the exce			
Over \$17,000,000	000,000	\$1,000,		33 040, 41,000,000		Albania and
Over \$17,000,000		<u>j \$1,000,</u>	000			
g Grassroots nontaxable amount (ent	or 25% of	f line 1f				,
h Subtract line 1g from line 1a If zero		-				
i Subtract line 1f from line 1c If zero						
If there is an amount other than zero			line 1. did the organiz	ι atıon file Form 4720		
reporting section 4911 tax for this y		31 IIIIC 111 OI	inc n, did the organiz	unon mo i omi 4120		Yes No
reporting section 4011 tax for this y	- Cui	4-Vear Ave	eraging Period Under	Section 501/h)		100
(Some organizations th		a section 5		have to complete all o	f the five columns b	elow.
	Lob	bying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a)	2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount						
(150% of line 2a, column(e))						
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount (150% of line 2d, column (e))						

Schedule C (Form 990 or 990-EZ) 2019

Schedule C (Form 990 or 990 EZ) 2019 ONE COLUMBUS Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

the lobbying activity		''	 	b)							
	the year, did the filing organization attempt to influence foreign, national, state, or gislation, including any attempt to influence public opinion on a legislative matter endum, through the use of eres? aft or management (include compensation in expenses reported on lines 1c through 1i)? advertisements? attemptize to other organizations for lobbying purposes? to other organizations for lobbying purposes? to other organizations, their staffs, government officials, or a legislative body? demonstrations, seminars, conventions, speeches, lectures, or any similar means? citivities? add lines 1c through 1i activities in line 1 cause the organization to be not described in section 501(c)(3)? "enter the amount of any tax incurred under section 4912 "enter the amount of any tax incurred by organization managers under section 4912 ing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). aubstantially all (90% or more) dues received nondeductible by members? organization make only in-house lobbying expenditures of \$2,000 or less? organization make only in-house lobbying and political campaign activity expenditures from the prior yea Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR answered "Yes." sissessments and similar amounts from members 162(e) nondeductible lobbying and political expenditures (do not include amounts of political ises for which the section 527(f) tax was paid). Ever from last year ate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues see were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess see organization agree to carryover to the reasonable estimate of nondeductible lobbying and political										
 During the year, did the filing organization attempt to influence foreign, national, state, or 											
local legislation, including any attempt to influence public opinion on a legislative matter											
or referendum, through the use of			_								
a Volunteers?											
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?											
c Media advertisements?											
d Mailings to members, legislators, or the public?											
e Publications, or published or broadcast statements?											
f Grants to other organizations for lobbying purposes?											
g Direct contact with legislators, their staffs, government officials, or a legislative body?											
i Other activities?			1								
•											
·											
·		1									
											
	tion 501(c)	(5), or sec	ction								
		(-), -:									
001(0)(0)			Yes	No							
Ware substantially all (00%) or mare) dues rescaud pendeductible by members?		1	X								
Were substantially all (90% or more) dues received nondeductible by members?				Х							
2. Did the assessment on make any in bound labbiums as manditures of \$2,000 or load?											
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from	n the nrior veai	r2 3		• 							
Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), sec	tion 501(c)	r? 3 (5), or sec		Х							
Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	tion 501(c)	r? 3 (5), or sec (b) Part		Х							
Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members	etion 501(c)(ed "No" OR	r? 3 (5), or sec		Х							
Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures).	etion 501(c)(ed "No" OR	r? 3 (5), or sec (b) Part		Х							
Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	etion 501(c)(ed "No" OR	r? 3 (5), or see (b) Part		Х							
Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polynomers) or which the section 527(f) tax was paid). a Current year	etion 501(c)(ed "No" OR	r? 3 (5), or sec (b) Part		Х							
Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polynomers polynomers) expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year	etion 501(c)(ed "No" OR	r? 3 (5), or sec (b) Part		Х							
Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total	etion 501(c)(ed "No" OR	r? 3 (5), or sec (b) Part		Х							
Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	etion 501(c)(ed "No" OR	r? 3 (5), or sec (b) Part		Х							
Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	etion 501(c)(ed "No" OR olitical	r? 3 (5), or sec (b) Part		Х							
Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	etion 501(c)(ed "No" OR olitical	r? 3 (5), or sec (b) Part		Х							
Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an expenditure next year?	etion 501(c)(ed "No" OR olitical	r? 3 (5), or sec (b) Part		Х							

Schedule C (Form 990 or 990-EZ) 2019

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

Name of the organization

ONE COLUMBUS

Employer identification number 27-1509190

Pa	rt I Organizations Maintaining Donor Advise		Acco	unts. Complete if the
_	organization answered "Yes" on Form 990, Part IV, Iir			
		(a) Donor advised funds	(b) F	unds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	_	unds	
	are the organization's property, subject to the organization's	_		☐ Yes ☐ No
6	Did the organization inform all grantees, donors, and donor a		•	
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose conf	erring	
Da	rt II Conservation Easements. Complete if the or	and the second three to be second to the second three to the secon	N/ line	Yes No
			IV, IIN e	7.
1	Purpose(s) of conservation easements held by the organization			University and lead over
	Preservation of land for public use (for example, recrea			lly important land area
	Protection of natural habitat	Preservation of a c	ertified	nistoric structure
_	Preservation of open space	f		
2	Complete lines 2a through 2d if the organization held a quality	fied conservation contribution in the form of a	conser	i
	day of the tax year		<u> </u>	Held at the End of the Tax Year
a	Total number of conservation easements		2a	
b	•		2t	1
C		• •	20	
d	Number of conservation easements included in (c) acquired a	arter 7/25/06, and not on a historic structure		. 1
•	listed in the National Register	landed and an electrical and because and but the annual	20	
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by the org	anizatio	on during the tax
	year •			
4	Number of states where property subject to conservation eas			
5	Does the organization have a written policy regarding the per			Yes No
_	violations, and enforcement of the conservation easements if Staff and volunteer hours devoted to monitoring, inspecting,		stion on	
6	Stan and volunteer hours devoted to monitoring, inspecting,	nandling of violations, and emorcing conserva	illon ca	sements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	fling of violations, and enforcing conseniation	easeme	ents during the year
•	S	and emoterning conservation	casciii	and during the year
8	Does each conservation easement reported on line 2(d) abov	re satisfy the requirements of section 170(h)(4)	(B)(i)	
Ü	and section 170(h)(4)(B)(ii)?	to satisfy the requirements of section 17 of 19(4)	(0)(1)	Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense stat	ement :	— · · · · — · · ·
3	balance sheet, and include, if applicable, the text of the footr	·		
	organization's accounting for conservation easements	ioto to the organization o imanetal statements		000000
Pa	rt III Organizations Maintaining Collections of	Art, Historical Treasures, or Other	Simil	lar Assets.
L	Complete if the organization answered "Yes" on Form			
1a	If the organization elected, as permitted under FASB ASC 95		alance	sheet works
	of art, historical treasures, or other similar assets held for put	•		
	service, provide in Part XIII the text of the footnote to its finar			•
b	If the organization elected, as permitted under FASB ASC 95		nce she	et works of
_	art, historical treasures, or other similar assets held for public	•		
	provide the following amounts relating to these items			,
	(i) Revenue included on Form 990, Part VIII, line 1		>	· \$
	(ii) Assets included in Form 990, Part X		•	\$
2	If the organization received or held works of art, historical tre-	asures, or other similar assets for financial gail	n, provi	
_	the following amounts required to be reported under FASB A	_		
а	Revenue included on Form 990, Part VIII, line 1	•	•	· \$
	Assets included in Form 990, Part X		•	· \$
	For Paperwork Reduction Act Notice, see the Instructions	s for Form 990.		Schedule D (Form 990) 2019

	dule D (Form 990) 2019 ONE COL								<u>09190</u>			
(P ar	tellij Organizations Maintaining C	ollections of Ar	t, Hist	orical Tre	asures, o	r Other	Simila Simila	r Assets	s (continu	ed)		
3	Ùsing the organization's acquisition, accessi	on, and other record	ls, check	any of the f	ollowing tha	ıt make sı	gnıfıcant	use of its				
	collection items (check all that apply)											
а	Public exhibition	•	d 🔲	Loan or exc	hange progr	ram						
b	Scholarly research		e 🗀	Other								
С	Preservation for future generations											
4	Provide a description of the organization's co	ollections and explai	n how th	ney further th	e organizati	on's exen	npt purpo	se in Part	XIII			
5	During the year, did the organization solicit of	r receive donations	of art, hi	storical treas	sures, or oth	er sımılar	assets		_			
	to be sold to raise funds rather than to be ma								Yes	No		
Par	Escrow and Custodial Arran	gements. Compl	ete if the	e organizatio	n answered	"Yes" on	Form 99	0, Part IV,	line 9, or			
	reported an amount on Form 990, Pa											
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for (contributions	s or other as	sets not i	ncluded	_	_	_		
	on Form 990, Part X?							L	_ Yes	No		
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	flowing t	table				1				
							<u></u>		Amount			
C	Beginning balance						<u>1c</u>					
d	Additions during the year						1d	<u> </u>				
е	Distributions during the year						1e	ļ				
f	Ending balance						<u>1f</u>	L	¬			
	Did the organization include an amount on F						ty?	_	_ Yes	⊢ No		
	If "Yes," explain the arrangement in Part XIII									ш_		
Far	Endowment Funds. Complete								1			
_	_	(a) Current year	(b) F	Prior year	(c) Two yea	ars back	(d) Three	years back	(e) Four y	ears back		
1a	Beginning of year balance											
b	b Contributions											
С	Net investment earnings, gains, and losses											
d	Grants or scholarships											
е	Other expenditures for facilities											
	and programs				<u>-</u>							
1	Administrative expenses					- 						
g	End of year balance	ent year and balana	o Orno 1e	a column (a)) hold as	<u>l</u>			1			
2	Provide the estimated percentage of the curr Board designated or quasi-endowment	ent year end balanc	e (ime iç %	y, column (a)) Helu as							
a	Permanent endowment	 %	— ″									
c												
·	The percentages on lines 2a, 2b, and 2c sho											
32	Are there endowment funds not in the posse	=	ation tha	t are held an	d administe	red for th	e organiz	ation				
-	by	oolon or the organiza	2000	it are there are	o aciiiiiioto	100 101 111	o organiz	ullon	۲	es No		
	(i) Unrelated organizations								3a(i)	55 1.65		
	(ii) Related organizations								3a(ii)	1		
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requi	red on S	chedule R?					3b			
4	Describe in Part XIII the intended uses of the	•										
Par	tւVI∎ Land, Buildings, and Equipm	ent.										
	Complete if the organization answere	d "Yes" on Form 990), Part IV	/, line 11a S	ee Form 990), Part X,	line 10					
	Description of property	(a) Cost or o		ĭ	or other	T	ccumulate	ed	(d) Book v	/alue		
		basis (investr	ment)	basis	(other)	dep	preciation					
1a	Land					200						
b	Buildings					L						
	Leasehold improvements			1,26	0,777.		92,5		668	,219.		
d	Equipment			48	3,744.	3	312,3	46.	171	398.		
<u>e</u>	Other											
Total	. Add lines 1a through 1e (Column (d) must e	gual Form 990. Part	X. colun	nn (B). line 10)c.),			ightharpoonup	839	,617.		

Schedule D (Form 990) 2019

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

Schedule D (Form 990) 2019

7,629,913.

(8)

Total. (Column (b) must equal Form 990, Part X. col. (B) line 25.)

SCHEDULE I (Form 990)

orm 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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2019	Open to Public	Inspection
7	odo	Ξ

OMB No 1545-0047-

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

Name of the organization ONE COLUMBITS	BIIS						Employer identification number
Part I General Information on Grants and Assistance	nd Assistance			į			001001-17
1 Does the organization maintain records to substantiate the amount of the grants or assistance, and the selection	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	stance, and the selectiv	no
criteria used to award the grants or assistance?	stance?						☐ Yes X No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	cedures for monit	oring the use of grant	funds in the United	States			
_	Domestic Organiz	ations and Domestic		omplete if the orga	anization answered "Y	Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	IV, line 21, for any
recipient that received more than \$5,000 Part II can be duplicated if additional space is needed	55,000 Part II can	be duplicated if addition	onal space is need	þ			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
REVIVENTURES							
COLUMBUS, OH 43212	31-1658220	501(c)(3)	300,000.	0.	N/A	NONE	2019 ESP COST SHARE
GREATER COLUMBUS SISTERS CITIES							
INTERNATIONAL - 88 E. BROAD STREET STE. 1750 - COLUMBUS OH							
	31-1483891	501(C)(3)	25 000	c	4 /2	A NO.	2019 STATEMENT OF STATEMENT
		(0)(0)(10)		,	W/W	NONE	ZOIS FUNDING OFFRATIONS
				1			
	nd government org	anizations listed in the	fine 1 table				2.
3 Enter total number of other organizations listed in the line 1 table	listed in the line 1	table					0.
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instruction	ons for Form 990.					Schedule I (Form 990) (2019)

Page 2 (f) Description of noncash assistance 27-1509190 (e) Method of valuation (book, FMV, appraisal, other) Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. Schedule I (Form 990) (2019)

ONE COLUMBUS

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

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

Part III | Grants and Other Assistance to Domestic Individuals. THE RECIPIENT ORGANIZATIONS IS NOT MONITORED (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients ONE COLUMBUS (a) Type of grant or assistance THE FUNDS BY PART I, LINE 2: OF THE USE

Schedule I (Form 990) (2019)

44

932102 10-26-19

SCHEDULE L

Transactions With Interested Persons

(Form 990 or 990-EZ) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

▶ Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

Open To Public Inspection

Name of the organization	NE COLUM	DIIC			Employer identification numbe 27-1509190									
			01(c)(3), secti	on 501(c)(4), and sec	ction 501(c)(29) orga								
	organization ansv	vered "Yes" on f	Form 9	90, Pa	rt IV, line 25a or 25b	, or Form 990-EZ, Pa	art V, I	ne 40	b					
1 (a) Name of disqualified p	(b) F	Relationship bety			ified	c) Description of tran	sactio	n		(d)	Corre	cted?		
(a) Name of disqualified p	person	person and or	rganıza	ation			isactio	11		_ Y	es	No		
										+	_			
							-			+-	-+			
					 	<u></u> -				+	-			
		-			- -	_				+-				
	·-													
2 Enter the amount of tax	incurred by the o	rganization man	agers	or disq	ualified persons dur	ng the year under								
section 4958								\$						
3 Enter the amount of tax,	if any, on line 2,	above, reimburs	ed by	the org	ganization			▶ \$						
Part II Loans to and	/or From Int	erested Pers	sons.											
					Part V line 38a or F	orm 990, Part IV, lin	e 26 d	or if th	e orga	nizatio	ın			
•	ount on Form 990				Tare V, into ood of t	o 000, 1 a.c (1, 1	0 20, 0		o orga		••			
(a) Name of	(b) Relationship	(c) Purpose	(d) La	oan to or	(e) Original	(f) Balance due	(g)		(h) App	proved	, **	ritten		
interested person	with organization	of loan		ization?	principal amount		defa	ult?	comm		agree	ment?		
·····			То	From	· · ·		Yes	No	Yes	No	Yes	No		
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<u>ſotal</u> Part III │ G rants or As	sistance Ber	efiting Inter	este	d Per	sons.		L		<u> </u>					
Complete if the c	organization ansv	vered "Yes" on I	Form 9	90, Pa	rt IV, line 27									
(a) Name of interested p	person	(b) Relationship interested pers the organiza	on an		(c) Amount of assistance	(d) Type assistan	· .) Purpose of assistance				
								_						
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	+							-+						
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Sched	dule L (Fòrm 990 or 990-EZ) 2019 ONE CC	LUMBUS		<u>27-1509</u>	190	Page 2
	t IV Business Transactions Involv	ing Interested Persons.				
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 28a, 28	3b, or 28c			
	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organı	aring of zation's nues?
muz	COLIMBIA DADMARDOUTD	VENDY MODONALD DDE	2 001 050	MD MODONA	Yes	No
THE	COLUMBUS PARTNERSHIP COLUMBUS PARTNERSHIP	KENNY MCDONALD, PRE ALEX FISCHER, CHAIR	3,901,050.			X
11115	COLOMBOS FARTNERSHIF	ALBA FISCHER, CHAIR	3,901,030.	PIR. FISCHER		 ^ -
			 -			
Par	V Supplemental Information.					<u> </u>
1	Provide additional information for response	onses to questions on Schedule L (see ii	nstructions)			
SCH	L, PART IV, BUSINESS T	RANSACTIONS INVOLVIN	G INTERESTE	D PERSONS:		
/ 3 \	NAME OF DEPCON. MUE CO.	IIMDIIG DADMNEDGUITD				
<u>(A)</u>	NAME OF PERSON: THE CO	LUMBUS PARTNERSHIP				
(B)	RELATIONSHIP BETWEEN I	NTERESTED PERSON AND	ORGANIZATI	ON:		
KEN	NY MCDONALD, PRESIDENT	E CEO				
(D)	DEGGETEMENT OF MENNINGS OF					
<u>(D)</u>	DESCRIPTION OF TRANSACT	FION: MR. MCDONALD S	ERVES AS TH	E SENTOR VIO	CE	
PRE	SIDENT OF THE COLUMBUS	PARTNERSHIP, THE ORG	ANIZATION T	HAT MANAGES	THE	
000					-	
OPE	RATIONS OF ONE COLUMBUS	•				
						_
(A)	NAME OF PERSON: THE CO	LUMBUS PARTNERSHIP	-			
/ D \	DELAMIONGUED DEMUREN I	AMEDICAMED DEDGON AND	000000000	017		
<u>(B)</u>	RELATIONSHIP BETWEEN II	TERESTED PERSON AND	ORGANIZATI	ON:		
<u>ALE</u>	X FISCHER, CHAIRMAN OF	THE BOARD				
(D)	DESCRIPTION OF TRANSACT	TION: MR. FISCHER SE	RVES AS THE	PRESIDENT A	ND	
CEO	OF THE COLUMBUS PARTNER	RSHIP, THE ORGANIZAT	ION THAT MA	NAGES THE		
	RATIONS OF ONE COLUMBUS		-			
					_	-
					-	
				·• ··		

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

ONE COLUMBUS

Employer identification number 27-1509190

0112 0020120
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
ONE COLUMBUS IS A REGIONAL PRIVATE-PUBLIC SECTOR PARTNERSHIP THAT WILL
LEVERAGE CENTRAL OHIO'S RESEARCH AND ACADEMIC INSTITUTIONS, DIVERSE
INDUSTRIES TO POSITION THE STATE CAPITAL TO BECOME THE FASTEST GROWING
ECONOMY IN THE COUNTRY AND ONE OF THE NATION'S LEADERS IN ECONOMIC
DEVELOPMENT.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
ONE COLUMBUS IS A REGIONAL PRIVATE-PUBLIC SECTOR PARTNERSHIP THAT WILL
LEVERAGE CENTRAL OHIO'S RESEARCH AND ACADEMIC INSTITUTIONS, DIVERSE
INDUSTRIES TO POSITION THE STATE CAPITAL TO BECOME THE FASTEST GROWING
ECONOMY IN THE COUNTRY AND ONE OF THE NATION'S LEADERS IN ECONOMIC
DEVELOPMENT.
FORM 990, PART VI, SECTION A, LINE 2:
KENNY MCDONALD (PRESIDENT & CEO) AND ALEX FISCHER (DIRECTOR) ARE EMPLOYED
BY THE COLUMBUS PARTNERSHIP AS OFFICERS.
FORM 990, PART VI, SECTION A, LINE 3:
THE COLUMBUS PARTNERSHIP MANAGES THE OPERATIONS OF THE ORGANIZATION. THE
MANAGEMENT FEES REPORTED ON PART IX REFLECT ONE COLUMBUS'S PAYMENT FOR THE
SERVICES RENDERED BY THE COLUMBUS PARTNERSHIP'S EMPLOYEES.
FORM 990, PART VI, SECTION A, LINE 4:

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

Schedule O (Form 990 or 990-EZ) (2019)

932211 09-06-19

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XII, LINE 2C: THE PROCESSES FOR OVERSEEING THE AUDIT AND TH

SELECTION OF THE INDEPENDENT ACCOUNTANT REMAIN UNCHANGED FROM THE PRIOR

932212 09-06-19

Schedule O (Form 990 or 990-EZ) (2019)

Name of the organization	COLUMBUS	Employer iden	Page 2 htification number) 9 1 9 0
ONE	COLUMBUS		TATAO
YEAR.			
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SCHEDULE R (Form 990)

Parti

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

▶ Attach to Form 990.

2019 Open to Public Inspection

OMB No 1545-0047

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

Employer identification number 27-1509190 Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33 ONE COLUMBUS Name of the organization Department of the Treasury Internal Revenue Service

Direct controlling entity 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 End-of-year assets <u>e</u> Total income € Legal domicile (state or foreign country) Primary activity Name, address, and EIN (if applicable) of disregarded entity Part II

(a)	(q)	(0)	(p)	(e)	(4)	(6) ·	
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	Section 512(b)(13)	2(b)(13) lled
of related organization	-	foreign country)	section	status (if section	entity	entity?	,
				501(c)(3))		Yes	8
COLUMBUS 2020 FOUNDATION - 27-1509231							
150 S. FRONT ST., STE. 200	CHARITABLE: ECONOMIC						
COLUMBUS, OH 43215	DEVELOPMENT	оню	501(C)(3)	LINE 7	N/A		×
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	s for Form 990.				Schedule R (Form 990) 2019	Form 990) 2019

Schedule R (Form 990) 2019 ONE COLUMBUS

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.

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

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 Part IV

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	,	512(b)(13) controlled	5	Yes						ł						
	(H)	Percentage	1											_		
	(6)	Share of	assets													
	(±)	Share of total	2													
	(e)	Type of entity	or trust)	,												
	(p)	Direct controlling	()													
	(0)	Legal domicile (state or	foreign	country)										•		
ing the tax year	(q)	Primary activity														
organizations treated as a corporation or trust during the tax year	(a)	Name, address, and EIN of related organization														

Schedule R (Form 990) 2019

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
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Parts II-IV	
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rganization	(ii) annuities. (iii) rovalties, or (iv
rganization	i. (ii) annuities. (iii) rovalties, or fiv
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	Receipt of (i) interest. (ii) annuities. (iii) rovalties, or fiv
ar, did the organization	a Beceipt of (i) interest. (ii) annuities. (iii) rovalties, or (iv) rent from a controlled

- b Gift, grant, or capital contribution to related organization(s)

 - c Gift, grant, or capital contribution from related organization(s)
- d Loans or loan guarantees to or for related organization(s)
- e Loans or loan guarantees by related organization(s)
- f Dividends from related organization(s)
- Purchase of assets from related organization(s) Sale of assets to related organization(s)
- Exchange of assets with related organization(s)
- j Lease of facilities, equipment, or other assets to related organization(s)
- k Lease of facilities, equipment, or other assets from related organization(s)
- 1 Performance of services or membership or fundraising solicitations for related organization(s)
- m Performance of services or membership or fundraising solicitations by related organization(s)

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- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- Sharing of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses
- Reimbursement paid by related organization(s) for expenses
- Other transfer of cash or property to related organization(s)
- 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 s Other transfer of cash or property from related organization(s)

Z II LIE ALSWELLO ALLY OF THE ADOVE IS TES, SEE THE INSTRUCTIONS FOR INFORMATION OF WILL	o must complete tri	is line, including covered r	normation on who must complete this line, including covered relationships and transaction unresholds
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(9)			

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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 reparding exclusion for perfer investment and activities the percent of its activities (measured by total assets or gross revenue).

of entity			Predominant income	Are all	Share of	(9) Share of	Oispropor-	Code V-UBI	(j) General or	(K) Percentage
		(state or foreign country)	excluded from tax under sections 512-514)	101(2)(3) 101(2)(3) 101(2)(3) 101(2)(3) 101(2)(3)	total	end-of-year assets	tionate altocations? Yes No	amount in box 20 managing ownership of Schedule K-1 Pariner? (Form 1065) Yes No	managing partner?	ownership
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Schedule R (Form 990) 2019 ONE COLUMBUS Part VIII Supplemental Information	- · · · · · · · · · · · · · · · · · · ·
Provide additional information for responses to questions on Schedule R. See instruction	e
Provide additional information for responses to questions on scriedule in See instruction	<u> </u>
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