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Form 990-PF

Department of the Treasury
Internal Revenue Service

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation

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

Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No 1545-0052

2019

Open to Public Inspection

For calendar year 2019, or tax year beginning 01-01-2019, and ending 12-31-2019

Name of foundation
DEACONESS FOUNDATION FKA DEACONESS
COMMUNITY FOUNDATION

Number and street (or P.O. box number if mail is not delivered to street address)
2 SUMMIT PARK DRIVE SUITE 120

City or town, state or province, country, and ZIP or foreign postal code
INDEPENDENCE, OH 44131

G Check all that apply

☐ Initial return

☐ Initial return of a former public charity

☐ Final return

☐ Amended return

☐ Address change

☐ Name change

H Check type of organization

☒ Section 501(c)(3) exempt private foundation

☐ Section 4947(a)(1) nonexempt charitable trust

☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 56,172,694

J Accounting method

☐ Cash

☒ Accrual

☐ Other (specify) (Part I, column (d) must be on cash basis)

A Employer identification number
34-1372066

B Telephone number (see instructions)
(216) 741-4077

C If exemption application is pending, check here

D 1. Foreign organizations, check here

2. Foreign organizations meeting the 85% test, check here and attach computation

E If private foundation status was terminated under section 507(b)(1)(A), check here

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	12,320		
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B			
	3 Interest on savings and temporary cash investments			
	4 Dividends and interest from securities	1,513,728	1,513,728	
	5a Gross rents			
	b Net rental income or (loss)			
	6a Net gain or (loss) from sale of assets not on line 10	985,104		
	b Gross sales price for all assets on line 6a	14,341,875		
	7 Capital gain net income (from Part IV, line 2)		985,104	
	8 Net short-term capital gain			
	9 Income modifications			
	10a Gross sales less returns and allowances			
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)	16,096	0		
12 Total. Add lines 1 through 11	2,527,248	2,498,832		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	216,692	2,167	204,450
	14 Other employee salaries and wages	175,865	0	174,103
	15 Pension plans, employee benefits	69,320	177	65,961
	16a Legal fees (attach schedule)	5,074	0	5,758
	b Accounting fees (attach schedule)	19,625	0	19,625
	c Other professional fees (attach schedule)	78,709	0	64,657
	17 Interest			
	18 Taxes (attach schedule) (see instructions)	99,015	32,050	23,303
	19 Depreciation (attach schedule) and depletion	8,078	0	
	20 Occupancy	47,655	0	44,989
	21 Travel, conferences, and meetings	9,026	0	8,895
	22 Printing and publications			
	23 Other expenses (attach schedule)	338,387	236,306	108,540
	24 Total operating and administrative expenses. Add lines 13 through 23	1,067,446	270,700	720,281
	25 Contributions, gifts, grants paid	1,667,100		1,667,100
26 Total expenses and disbursements. Add lines 24 and 25	2,734,546	270,700	2,387,381	
	27 Subtract line 26 from line 12			
	a Excess of revenue over expenses and disbursements	-207,298		
	b Net investment income (if negative, enter -0-)		2,228,132	
c Adjusted net income (if negative, enter -0-)				

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form 990-PF (2019)

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	30,589	25,940	25,940
	2 Savings and temporary cash investments	1,139,284	1,546,100	1,546,100
	3 Accounts receivable ▶ <u>1,375</u>			
	Less allowance for doubtful accounts ▶ _____	8,353	1,375	1,375
	4 Pledges receivable ▶ _____			
	Less allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____			
	Less allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	15,530	21,942	21,942
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ _____			
Less accumulated depreciation (attach schedule) ▶ _____				
12 Investments—mortgage loans				
13 Investments—other (attach schedule)	47,946,602	54,463,645	54,463,645	
14 Land, buildings, and equipment basis ▶ <u>81,718</u>				
Less accumulated depreciation (attach schedule) ▶ <u>32,697</u>	5,213	49,021	49,021	
15 Other assets (describe ▶ _____)	105,090	64,671	64,671	
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	49,250,661	56,172,694	56,172,694	
Liabilities	17 Accounts payable and accrued expenses	67,313	73,555	
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	67,313	73,555	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions	48,428,646	55,322,281	
	25 Net assets with donor restrictions	754,702	776,858	
	Foundations that do not follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg, and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
	29 Total net assets or fund balances (see instructions)	49,183,348	56,099,139	
30 Total liabilities and net assets/fund balances (see instructions) .	49,250,661	56,172,694		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	49,183,348
2 Enter amount from Part I, line 27a	2	-207,298
3 Other increases not included in line 2 (itemize) ▶ _____	3	7,123,089
4 Add lines 1, 2, and 3	4	56,099,139
5 Decreases not included in line 2 (itemize) ▶ _____	5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	56,099,139

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a PUBLICLY TRADED SECURITIES	P		
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 14,341,875		13,356,771	985,104
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			985,104
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	<div style="display: flex; align-items: center;"> <div style="font-size: 3em; margin-right: 5px;">{</div> <div> If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 </div> <div style="font-size: 3em; margin-left: 5px;">}</div> </div>	2	985,104
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	<div style="display: flex; align-items: center;"> <div style="font-size: 3em; margin-right: 5px;">{</div> <div></div> <div style="font-size: 3em; margin-left: 5px;">}</div> </div>	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?



Yes



No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2018	2,138,998	51,309,064	0 041689
2017	2,180,197	50,503,299	0 043169
2016	2,625,164	45,891,666	0 057204
2015	1,979,750	46,647,311	0 042441
2014	1,885,416	47,624,580	0 039589

2 Total of line 1, column (d)	2	0 224092
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years	3	0 044818
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	53,109,139
5 Multiply line 4 by line 3	5	2,380,245
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	22,281
7 Add lines 5 and 6	7	2,402,526
8 Enter qualifying distributions from Part XII, line 4	8	2,387,381

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	44,563
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	44,563
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	44,563
6	Credits/Payments		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	82,693
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	35,000
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	117,693
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	73,130
11	Enter the amount of line 10 to be Credited to 2020 estimated tax ▶ 73,130 Refunded ▶	11	0

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ 0 (2) On foundation managers ▶ \$ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	Yes
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	Yes
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	Yes
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ _____		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	No
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the taxable year beginning in 2019? See the instructions for Part XIV If "Yes," complete Part XIV	9	No
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions.	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► WWW.DEACONESSFDN.ORG	13	Yes	
14	The books are in care of ► DEBORAH VESY Telephone no ► (216) 741-4077			

Located at ► 2 SUMMIT PARK DRIVE SUITE 120 INDEPENDENCE OH ZIP+4 ► 44131

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ► <input type="checkbox"/>			
	and enter the amount of tax-exempt interest received or accrued during the year ► 15			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►	16	Yes	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions. Organizations relying on a current notice regarding disaster assistance check here. ► <input type="checkbox"/>	1b		No
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? If "Yes," list the years ► 20____, 20____, 20____, 20____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2019).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a	During the year did the foundation pay or incur any amount to		Yes	No
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.		5b	
c	Organizations relying on a current notice regarding disaster assistance check here.	<input checked="" type="checkbox"/>		
	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	If "Yes," attach the statement required by Regulations section 53.4945–5(d)			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6b	No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			
	If "Yes" to 6b, file Form 8870			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7b	
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?			
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ALLISON RAND	VICE PRESIDENT, GRAN	83,425	7,062	15,285
2 SUMMIT PARK DRIVE 120 INDEPENDENCE, OH 44131	32 00			
MARY MARGEVICIUS	VICE PRESIDENT, FINA	80,316	6,621	2,174
2 SUMMIT PARK DRIVE 120 INDEPENDENCE, OH 44131	30 00			
Total number of other employees paid over \$50,000.				0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ROBERT W BAIRD & CO INCORPORATED 200 PUBLIC SQUARE SUITE 1650 CLEVELAND, OH 44114	INVESTMENT CONSULTING	100,804
Total number of others receiving over \$50,000 for professional services. ►		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 _____ _____ _____	
2 _____ _____ _____	
3 _____ _____ _____	
4 _____ _____ _____	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 _____ _____ _____	
2 _____ _____ _____	
All other program-related investments. See instructions.	
3 _____ _____	
Total. Add lines 1 through 3 ►	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	51,333,574
b	Average of monthly cash balances.	1b	2,584,334
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	53,917,908
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	53,917,908
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	808,769
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	53,109,139
6	Minimum investment return. Enter 5% of line 5.	6	2,655,457

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	2,655,457
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	44,563
b	Income tax for 2019 (This does not include the tax from Part VI).	2b	404
c	Add lines 2a and 2b.	2c	44,967
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	2,610,490
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	2,610,490
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	2,610,490

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	2,387,381
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	2,387,381
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	2,387,381

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				2,610,490
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only.			676,002	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2019				
a From 2014.				
b From 2015.				
c From 2016.				
d From 2017.				
e From 2018.				
f Total of lines 3a through e.	0			
4 Qualifying distributions for 2019 from Part XII, line 4 ▶ \$ <u>2,387,381</u>				
a Applied to 2018, but not more than line 2a			676,002	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2019 distributable amount.				1,711,379
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2019 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2020				899,111
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	0			
10 Analysis of line 9				
a Excess from 2015.				
b Excess from 2016.				
c Excess from 2017.				
d Excess from 2018.				
e Excess from 2019.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling. ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year	Prior 3 years			(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

a The name, address, and telephone number or email address of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	1,667,100
b <i>Approved for future payment</i>				
Total			3b	0

Enter gross amounts unless otherwise indicated

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)

[illegible]

Part XVII

- 1** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)(3) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
- a** Transfers from the reporting foundation to a noncharitable exempt organization of
- (1)** Cash.
- (2)** Other assets.
- b** Other transactions
- (1)** Sales of assets to a noncharitable exempt organization.
- (2)** Purchases of assets from a noncharitable exempt organization.
- (3)** Rental of facilities, equipment, or other assets.
- (4)** Reimbursement arrangements.
- (5)** Loans or loan guarantees.
- (6)** Performance of services or membership or fundraising solicitations.
- c** Sharing of facilities, equipment, mailing lists, other assets, or paid employees.
- d** If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here	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 taxpayer) is based on all information of which preparer has any knowledge.		
	***** _____ Signature of officer or trustee	2020-08-14 _____ Date	***** _____ Title

May the IRS discuss this return with the preparer shown below
 (see instr.) ☒ **Yes** ☐ **No**

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN P00743214
	MARK E NOBLE				
	Firm's name ▶ PEASE & ASSOCIATES LLC				
	Firm's address ▶ 1422 EUCLID AVE SUITE 400 CLEVELAND, OH 44115				Firm's EIN ▶ 36-4267431 Phone no (216) 348-9600

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
DEBORAH VESY	PRESIDENT & CEO 40 00	216,692	17,693	16,224
2 SUMMIT PARK DRIVE 120 INDEPENDENCE, OH 44131				
COLLETTE JONES	TRUSTEE 0 50	0	0	0
2 SUMMIT PARK DRIVE 120 INDEPENDENCE, OH 44131				
CARRIE CLARK	TRUSTEE 0 50	0	0	0
2 SUMMIT PARK DRIVE 120 INDEPENDENCE, OH 44131				
SCOTT HAMILTON	TRUSTEE 0 50	0	0	0
2 SUMMIT PARK DRIVE 120 INDEPENDENCE, OH 44131				
MAGGIE JACKSON	TRUSTEE 0 50	0	0	0
2 SUMMIT PARK DRIVE 120 INDEPENDENCE, OH 44131				
RUSSELL LAMB	TRUSTEE 0 50	0	0	0
2 SUMMIT PARK DRIVE 120 INDEPENDENCE, OH 44131				
JOE NANNI	TRUSTEE 0 50	0	0	0
2 SUMMIT PARK DRIVE 120 INDEPENDENCE, OH 44131				
JOHN NESTOR	CHAIR 0 50	0	0	0
2 SUMMIT PARK DRIVE 120 INDEPENDENCE, OH 44131				
ANN O'BRIEN	SECRETARY 0 50	0	0	0
2 SUMMIT PARK DRIVE 120 INDEPENDENCE, OH 44131				
DAVID REINES	VICE CHAIR 0 50	0	0	0
2 SUMMIT PARK DRIVE 120 INDEPENDENCE, OH 44131				
LAWRENCE YUNASKA	TREASURER/ASSISTANT SECRET 0 50	0	0	0
2 SUMMIT PARK DRIVE 120 INDEPENDENCE, OH 44131				
SALLY RABER TURNER	TRUSTEE 0 50	0	0	0
2 SUMMIT PARK DRIVE 120 INDEPENDENCE, OH 44131				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BOYS AND GIRLS CLUBS OF CLEVELAND 3340 TROWBRIDGE AVE CLEVELAND, OH 44109		PC	FOR THE NEXT CAREER READINESS PROGRAM	125,000
BVU THE CENTER FOR NONPROFIT EXCELLENCE 1300 EAST 9TH STREET SUITE 1805 CLEVELAND, OH 44114		PC	FOR SERVICES TO NONPROFITS	90,000
CANDID MIDWEST 1422 EUCLID AVENUE SUITE 1600 CLEVELAND, OH 44115		PC	TO SUPPORT THE ADVANCEMENT OF PHILANTHROPY	5,000
Total ▶ 3a				1,667,100

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CENTER FOR COMMUNITY SOLUTIONS 1501 EUCLID AVENUE SUITE 310 CLEVELAND, OH 44115		PC	TO SUPPORT THE RESEARCH-ORIENTED MISSION OF THE ORGANIZATION	1,000
CITY CLUB OF CLEVELAND 850 EUCLID AVENUE CLEVELAND, OH 44114		PC	FOR SPONSORSHIP OF THE 2019-2020 WORKFORCE DEVELOPMENT SERIES	10,000
COLLEGE NOW GREATER CLEVELAND 1500 WEST 3RD STREET CLEVELAND, OH 44113		PC	TO DEVELOP AND LAUNCH THE MAP DATABASE OF POSTSECONDARY TRAINING OPPORTUNITIES AND FOR A PLANNING PROCESS FOR THE EXPANSION OF CAREER ADVISING SERVICES	175,000
Total ▶ 3a				1,667,100

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FAITH UCC3411 RICHMOND AVENUE NE CANTON, OH 44705		PC	FOR THE CULINARY CLUB	1,000
FEDERATED UNITED CHURCH OF CHRIST 76 BELL STREET CHAGRIN FALLS, OH 44022		PC	FOR THE LOAVES AND FISHES MINISTRY PROJECT	4,800
FUND FOR OUR ECONOMIC FUTURE OF NORTHEAST OHIO 1360 EAST NINTH STREET SUITE 210 CLEVELAND, OH 44114		PC	FOR MEMBERSHIP FOR 2019-2021 (\$50,000), AND AS FISCAL SPONSOR FOR THE CUYAHOGA COUNTY WORKFORCE FUNDERS GROUP	200,000
Total ▶ 3a				1,667,100

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
IMANI UNITED CHURCH OF CHRIST 1505 EAST 260TH STREET EUCLID, OH 44132		PC	FOR OUTREACH AND MINISTRY PROJECTS	5,000
JUMPSTART 6701 CARNEGIE AVE SUITE 100 CLEVELAND, OH 44103		PC	TO DESIGN A WORKFORCE INITIATIVE IN PARTNERSHIP WITH YOU AND OPEN DOORS ACADEMY	40,000
LEGAL AID SOCIETY OF CLEVELAND 1223 WEST SIXTH STREET CLEVELAND, OH 44113		PC	FOR THE EMPLOYMENT AND ECONOMIC SECURITY LAW PRACTICE	130,000
Total ▶ 3a				1,667,100

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MIDDLEBURGH HEIGHTS COMMUNITY CHURCH UCC 7165 BIG CREEK PARKWAY CLEVELAND, OH 44130		PC	FOR FOOD AND HOUSEHOLD SUPPLIES FOR MULTIPLE MISSION PROJECTS	3,800
MT ZION CONGREGATIONAL CHURCH UCC 10723 MAGNOLIA DRIVE CLEVELAND, OH 44106		PC	FOR JOBS PROGRAMS	5,000
OPEN DOORS ACADEMY 1427 EAST 36TH STREET NO 4206A CLEVELAND, OH 44114		PC	FOR COLLEGE AND CAREER READINESS PROGRAMMING AND FOR POST-SECONDARY COUNSELORS	145,000
Total ▶ 3a				1,667,100

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PHILANTHROPY OHIO 500 SOUTH FRONT STREET SUITE 900 COLUMBUS, OH 43215		PC	TO SUPPORT LEADERSHIP FOR ORGANIZED PHILANTHROPY IN OHIO	5,000
RIDGE ROAD UNITED CHURCH OF CHRIST 6050 RIDGE ROAD CLEVELAND, OH 44129		PC	FOR DISTRIBUTION OF SCHOOL SUPPLIES AND OTHER NEEDED ITEMS FOR THE PARMA AREA FAMILY COLLABORATIVE	4,000
STRONGSVILLE UNITED CHURCH OF CHRIST 13740 PEARL ROAD STRONGSVILLE, OH 44136		PC	FOR THE FREE LUNCH PROGRAM	5,000
Total ▶ 3a				1,667,100

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE CENTERS FOR FAMILIES AND CHILDREN 4500 EUCLID AVENUE CLEVELAND, OH 44103		PC	FOR GENERAL OPERATING SUPPORT FOR EL BARRIO	150,000
THE CHAPEL135 FIR HILL AKRON, OH 44304		PC	MEMORIAL GIFT	500
THE MANUFACTURING ADVOCACY AND GROWTH NETWORK (MAGNET) 1768 E 25TH STREET CLEVELAND, OH 44114		PC	FOR THE MANUFACTURING SECTOR PARTNERSHIP	150,000
Total ▶ 3a				1,667,100

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE SALVATION ARMY 2507 EAST 22ND STREET CLEVELAND, OH 44115		PC	FOR THE PATHWAYS TO WORK PROGRAM	45,000
TOWARDS EMPLOYMENT 1255 EUCLID AVENUE SUITE 300 CLEVELAND, OH 44115		PC	FOR SUPPORT OF CAREER PATHWAYS PROGRAMMING	100,000
UNIVERSITY HOSPITALS HEALTH SYSTEM INC 11100 EUCLID AVENUE CLEVELAND, OH 44106		PC	FOR PATHWAY COACHING	83,000
Total ▶ 3a				1,667,100

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WEST PARK UCC3909 ROCKY RIVER DR CLEVELAND, OH 44111		PC	FOR EMERGENCY FOOD AND PERSONAL SUPPLY DISTRIBUTION AND A MITTEN LINE	4,000
YOUTH OPPORTUNITIES UNLIMITED 1361 EUCLID AVE CLEVELAND, OH 44115		PC	FOR GENERAL OPERATING SUPPORT, YOUTH WORKFORCE PIPELINE, AND CONVENING YOUTH-SERVING ORGANIZATIONS	180,000
Total ► 3a				1,667,100

TY 2019 Accounting Fees Schedule

Name: DEACONESS FOUNDATION FKA DEACONESS
COMMUNITY FOUNDATION

EIN: 34-1372066

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	19,625	0		19,625

TY 2019 Explanation of Non-Filing with Attorney General Statement

Name: DEACONESS FOUNDATION FKA DEACONESS
COMMUNITY FOUNDATION

EIN: 34-1372066

Statement:

THE OHIO ATTORNEY GENERAL HAS EXEMPTED THIS ORGANIZATION FROM REGISTRATION IN THE STATE OF OHIO.

TY 2019 Investments - Other Schedule

Name: DEACONESS FOUNDATION FKA DEACONESS
COMMUNITY FOUNDATION

EIN: 34-1372066

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
SCHAFER	FMV	5,200,548	5,200,548
KAYNE SMCAP	FMV	4,197,671	4,197,671
PIMCO TOTAL RETURN	FMV	10,927,968	10,927,968
BLACKROCK HIGH YIELD	FMV	3,173,551	3,173,551
DIAMOND HILL	FMV	5,350,011	5,350,011
SUSTAINABLE GROWTH	FMV	5,873,196	5,873,196
DELAWARE INTERNATIONAL	FMV	1,739,996	1,739,996
WCM	FMV	5,517,583	5,517,583
PIMCO ALL ASSET	FMV	4,581,412	4,581,412
TR DISTRIBUTION ACCOUNT	FMV	177	177
NON TRUST - SUSTAINABLE GROWTH	FMV	848,724	848,724
NON TRUST - WCM	FMV	797,260	797,260
NON TRUST - BLACKROCK HIGH YIELD	FMV	508,930	508,930
NON TRUST - KAYNE SMCAP	FMV	617,054	617,054
NON TRUST - DIAMOND HILL	FMV	777,808	777,808
NON TRUST - SCHAFER	FMV	764,728	764,728
NON TRUST - DELAWARE INTERNATIONAL	FMV	287,064	287,064
NON TRUST - PIMCO ALL ASSET	FMV	661,499	661,499
NON TRUST - PIMCO TOTAL RETURN	FMV	1,863,827	1,863,827
THE DEBORAH A VESY FUND	FMV	774,638	774,638

TY 2019 Legal Fees Schedule

Name: DEACONESS FOUNDATION FKA DEACONESS
COMMUNITY FOUNDATION

EIN: 34-1372066

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL	5,074	0		5,758

TY 2019 Other Assets Schedule

Name: DEACONESS FOUNDATION FKA DEACONESS
COMMUNITY FOUNDATION

EIN: 34-1372066

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
DIVIDENDS RECEIVABLE	85,979	62,451	62,451
INTEREST RECEIVABLE	4,225	2,220	2,220
DEPOSITS	14,886	0	0

TY 2019 Other Expenses Schedule

Name: DEACONESS FOUNDATION FKA DEACONESS
COMMUNITY FOUNDATION

EIN: 34-1372066

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
DUES AND SUBSCRIPTIONS	9,634	0		9,651
INSURANCE	27,006	0		26,957
INVESTMENT MANAGEMENT FEES	236,306	236,306		0
OTHER PURCHASED SERVICES	58,237	0		60,509
SERVICE CONTRACTS	6,395	0		11,099
WORKERS' COMPENSATION	809	0		324

TY 2019 Other Income Schedule

Name: DEACONESS FOUNDATION FKA DEACONESS
COMMUNITY FOUNDATION

EIN: 34-1372066

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
PROFESSIONAL FEES	16,500		16,500
LOSS ON FIXED ASSETS	-466		-466
OTHER INCOME	62		62

TY 2019 Other Increases Schedule

Name: DEACONESS FOUNDATION FKA DEACONESS
COMMUNITY FOUNDATION

EIN: 34-1372066

Description	Amount
UNREALIZED GAIN ON INVESTMENTS	7,123,089

TY 2019 Other Professional Fees Schedule

Name: DEACONESS FOUNDATION FKA DEACONESS
COMMUNITY FOUNDATION

EIN: 34-1372066

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MANAGEMENT & CONSULTING	78,709	0		64,657

TY 2019 Taxes Schedule

Name: DEACONESS FOUNDATION FKA DEACONESS
COMMUNITY FOUNDATION

EIN: 34-1372066

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MISCELLANEOUS TAXES, PERMITS, AND LICENSES	30,833	32,050		0
NET INVESTMENT INCOME TAX	44,255	0		0
PAYROLL TAXES	23,927	0		23,303

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93491252001140	
Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service		Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Go to www.irs.gov/Form990 for the latest information			OMB No 1545-0047 2019
Name of the organization DEACONESS FOUNDATION FKA DEACONESS COMMUNITY FOUNDATION				Employer identification number 34-1372066	

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

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

General Rule

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

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . ▶ \$ _____

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

Name of organization
DEACONESS FOUNDATION FKA DEACONESS
COMMUNITY FOUNDATION

Employer identification number
34-1372066

Part I

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THE JOHN HUNTINGTON BENEVOLENT FUND C/O THE CLEVELAND FOUNDATION 1422 E CLEVELAND, OH 44115	\$ 5,294	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)
2	THE JOHN R RAIBLE FUND C/O THE CLEVELAND FOUNDATION 1422 E CLEVELAND, OH 44115	\$ 7,026	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions)

Name of organization DEACONESS FOUNDATION FKA DEACONESS COMMUNITY FOUNDATION	Employer identification number 34-1372066
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Part II Noncash Property			
(a) No. from Part I	(b) Description of noncash property given <small>(see instructions) Use duplicate copies of Part II if additional space is needed</small>	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	

Name of organization DEACONESS FOUNDATION FKA DEACONESS COMMUNITY FOUNDATION	Employer identification number 34-1372066
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Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____ Use duplicate copies of Part III if additional space is needed
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	_____ _____ _____	_____ _____ _____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	_____ _____ _____	_____ _____ _____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	_____ _____ _____	_____ _____ _____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	_____ _____ _____	_____ _____ _____	