

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

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

OMB No. 1545-0047
2019
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 07-01-2019, and ending 06-30-2020

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

C Name of organization
COMMUNITYGIVING

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
101 7TH AVENUE S NO 100

City or town, state or province, country, and ZIP or foreign postal code
ST CLOUD, MN 56301

D Employer identification number
36-3412544

E Telephone number
(320) 253-4380

G Gross receipts \$ 35,753,095

F Name and address of principal officer:
STEVEN JOUL
101 7TH AVENUE S NO 100
ST CLOUD, MN 56301

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
If "No," attach a list. (see instructions)
H(c) Group exemption number ▶

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

J Website: ▶ WWW.COMMUNITYGIVING.ORG

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1985 **M** State of legal domicile: MN

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
TO ENGAGE PEOPLE, CONNECT RESOURCES, AND BUILD COMMUNITY.

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

3 Number of voting members of the governing body (Part VI, line 1a)	20
4 Number of independent voting members of the governing body (Part VI, line 1b)	19
5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	23
6 Total number of volunteers (estimate if necessary)	550
7a Total unrelated business revenue from Part VIII, column (C), line 12	0
7b Net unrelated business taxable income from Form 990-T, line 39	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	15,498,688	12,924,714
9 Program service revenue (Part VIII, line 2g)	0	0
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	5,491,726	4,300,721
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-53,258	-43,817
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	20,937,156	17,181,618
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	13,745,540	16,803,450
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,567,028	1,660,778
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 704,256		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	711,774	608,014
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	16,024,342	19,072,242
19 Revenue less expenses. Subtract line 18 from line 12	4,912,814	-1,890,624
	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	148,370,529	151,351,396
21 Total liabilities (Part X, line 26)	26,417,568	29,492,686
22 Net assets or fund balances. Subtract line 21 from line 20	121,952,961	121,858,710

Part II Signature Block

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

Sign Here

Signature of officer
Date 2020-11-05

STEVEN JOUL PRESIDENT
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date 2020-10-29	Check <input type="checkbox"/> if self-employed	PTIN P00653287
Firm's name ▶ MILLER WELLE HEISER & CO LTD	Firm's EIN ▶ 41-1334380		Phone no. (320) 253-9505	
Firm's address ▶ 4170 THIELMAN LANE PO BOX 159 ST CLOUD, MN 563020159				

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

TO ENGAGE PEOPLE, CONNECT RESOURCES, AND BUILD COMMUNITY.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 16,795,539 including grants of \$ 16,225,223) (Revenue \$)
See Additional Data

4b (Code:) (Expenses \$ 298,221 including grants of \$ 298,205) (Revenue \$)
See Additional Data

4c (Code:) (Expenses \$ 366,672 including grants of \$ 280,022) (Revenue \$)
See Additional Data

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

4e Total program service expenses ▶ 17,460,432

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No
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		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		No
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		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
11a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	Yes	
11b	Did the organization report an amount for investments—other securities—in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	Yes	
11c	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		No
11d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		No
11e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	Yes	
11f	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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	Yes	
12b	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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?		No
14b	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		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		No
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		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		No
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	Yes	
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		No
20b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	Yes	

Part IV Checklist of Required Schedules (continued)

Table with 3 main columns: Question/Description, Yes, No. Rows include questions 22 through 38 regarding grants, compensation, tax-exempt bonds, excess benefit transactions, and related party transactions.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 main columns: Question/Description, Yes, No. Rows include 1a (Form 1096), 1b (Forms W-2G), and 1c (gambling winnings).

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

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a		23		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				2b	Yes
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?				3a	No
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O				3b	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?				4a	No
b If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				5a	No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?				5b	No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?				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	No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?				6b	
7 Organizations that may receive deductible contributions under section 170(c).					
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	Yes
b If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b	Yes
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?				7c	No
d If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?				7e	No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?				7f	No
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	No
9 Sponsoring organizations maintaining donor advised funds.					
a Did the sponsoring organization make any taxable distributions under section 4966?				9a	No
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?				9b	No
10 Section 501(c)(7) organizations. Enter:					
a Initiation fees and capital contributions included on Part VIII, line 12	10a				
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11 Section 501(c)(12) organizations. Enter:					
a Gross income from members or shareholders	11a				
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b				
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?					
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b				
13 Section 501(c)(29) qualified nonprofit health insurance issuers.					
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.				13a	
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c Enter the amount of reserves on hand	13c				
14a Did the organization receive any payments for indoor tanning services during the tax year?				14a	No
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O				14b	
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.				15	No
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.				16	No

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



Section A. Governing Body and Management

Table with 5 main rows and 3 sub-columns (1a, 1b, and Yes/No). Row 1a: 20. Row 1b: 19. Rows 2-9 contain various questions about governance and management with Yes/No columns.

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

Table with 16 rows and 3 columns (10a-16b, Yes, No). Contains questions about local chapters, written policies, conflict of interest, whistleblower, document retention, and compensation.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed: MN
18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: STEVEN JOUL 101 7TH AVENUE S SUITE 100 ST CLOUD, MN 56301 (320) 253-4380

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. 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, or 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.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) LAURA HELMER DIRECTOR	1.00	X					0	0	0	
(2) BRENDA FELLING JENNISSON DIRECTOR	1.00	X					0	0	0	
(3) MARYANNE MAHOWALD DIRECTOR	1.00	X					0	0	0	
(4) SONJA MERRILD DIRECTOR	1.00	X					0	0	0	
(5) STEVE PETERSON DIRECTOR	1.00	X					0	0	0	
(6) BOB SWEENEY DIRECTOR	1.00	X					0	0	0	
(7) TERRY TONE DIRECTOR	1.00	X					0	0	0	
(8) KEN WARNER DIRECTOR	1.00	X					0	0	0	
(9) JOSH TATGE DIRECTOR	1.00	X					0	0	0	
(10) JANELLE RILEY DIRECTOR	1.00	X					0	0	0	
(11) STEVE LARAWAY DIRECTOR	1.00	X					0	0	0	
(12) JIM ROELOFS DIRECTOR	1.00	X					0	0	0	
(13) BOB ROEPKE DIRECTOR	1.00	X					0	0	0	
(14) DEBRA LEIGH DIRECTOR	1.00	X					0	0	0	
(15) PASTOR JON DAHL DIRECTOR	1.00	X					0	0	0	
(16) STEVEN JOUL PRESIDENT	40.00			X			190,619	0	18,659	
(17) BRUCE POHLIG CHAIR	1.00			X			0	0	0	

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a			
	b Membership dues	1b			
	c Fundraising events	1c	59,428		
	d Related organizations	1d			
	e Government grants (contributions)	1e			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	12,865,286		
	g Noncash contributions included in lines 1a - 1f:\$	1g	4,562,726		
	h Total. Add lines 1a-1f		12,924,714		

Program Service Revenue			Business Code			
	2a					
b						
c						
d						
e						
f All other program service revenue						
g Total. Add lines 2a-2f.						

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			2,794,155			2,794,155	
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6a Gross rents		(i) Real	(ii) Personal				
			6a	60,700				
		b Less: rental expenses	6b	127,095				
		c Rental income or (loss)	6c	-66,395				
	d Net rental income or (loss)				-66,395			-66,395
	7a Gross amount from sales of assets other than inventory		(i) Securities	(ii) Other				
			7a	19,945,922				
		b Less: cost or other basis and sales expenses	7b	18,439,356				
		c Gain or (loss)	7c	1,506,566				
	d Net gain or (loss)				1,506,566			1,506,566
	8a Gross income from fundraising events (not including \$ 59,428 of contributions reported on line 1c). See Part IV, line 18		8a	27,604				
			b Less: direct expenses	8b	5,026			
	c Net income or (loss) from fundraising events				22,578			22,578
	9a Gross income from gaming activities. See Part IV, line 19		9a					
			b Less: direct expenses	9b				
	c Net income or (loss) from gaming activities							
	10a Gross sales of inventory, less returns and allowances		10a					
b Less: cost of goods sold			10b					
c Net income or (loss) from sales of inventory								
11a Miscellaneous Revenue		Business Code						
b								
c								
d All other revenue								
e Total. Add lines 11a-11d								
12 Total revenue. See instructions				17,181,618	0	0	4,256,904	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 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	16,605,375	16,605,375		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	198,075	198,075		
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	216,508	48,575	93,909	74,024
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	1,164,294	261,219	505,008	398,067
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	57,778	12,965	25,060	19,753
9 Other employee benefits	123,990	27,705	53,843	42,442
10 Payroll taxes	98,208	22,003	42,615	33,590
11 Fees for services (non-employees):				
a Management				
b Legal	10,850	2,423	4,712	3,715
c Accounting	17,399	4,009	7,488	5,902
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion	39,930	9,029	17,280	13,621
13 Office expenses	141,271	32,694	60,717	47,860
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	5,802	5,802		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	38,327	8,700	16,568	13,059
23 Insurance	15,070	3,527	6,455	5,088
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a OTHER	180,615	180,615		
b ADMINISTRATIVE	98,171	24,204	47,579	26,388
c DUES & SUBSCRIPTIONS	35,516	7,980	15,398	12,138
d DEVELOPMENT & MARKETING	25,063	5,532	10,922	8,609
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	19,072,242	17,460,432	907,554	704,256
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	2,051,249	1	1,067,020
	2 Savings and temporary cash investments	946,605	2	1,138,354
	3 Pledges and grants receivable, net	37,889	3	100,610
	4 Accounts receivable, net	840,177	4	874,085
	5 Loans and other 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		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	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	50,114	9	58,083
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	1,120,646		
	b Less: accumulated depreciation	448,756	10c	671,890
	11 Investments—publicly traded securities	132,538,680	11	136,326,143
	12 Investments—other securities. See Part IV, line 11	11,206,529	12	11,115,211
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	148,370,529	16	151,351,396	
Liabilities	17 Accounts payable and accrued expenses	111,663	17	93,128
	18 Grants payable	131,390	18	371,984
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other 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		22	
	23 Secured mortgages and notes payable to unrelated third parties	169,433	23	77,904
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	26,005,082	25	28,949,670
	26 Total liabilities. Add lines 17 through 25	26,417,568	26	29,492,686
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	94,697,452	27	94,477,076
	28 Net assets with donor restrictions	27,255,509	28	27,381,634
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	121,952,961	32	121,858,710	
33 Total liabilities and net assets/fund balances	148,370,529	33	151,351,396	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	17,181,618
2	Total expenses (must equal Part IX, column (A), line 25)	2	19,072,242
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,890,624
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	121,952,961
5	Net unrealized gains (losses) on investments	5	-1,458,617
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	3,254,990
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	121,858,710

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 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?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

Additional Data

Software ID:

Software Version:

EIN: 36-3412544

Name: COMMUNITYGIVING

Form 990 (2019)

Form 990, Part III, Line 4a:

GRANTMAKING - THE FOUNDATION ADMINISTERED THE GRANTING OF ALMOST \$17 MILLION IN DISTRIBUTIONS TO OVER 800 NON-PROFITS FROM THE 882 FUNDS SET UP BY DONORS.

Form 990, Part III, Line 4b:

SCHOLARSHIPS - THE FOUNDATION ADMINISTERS 86 SCHOLARSHIP FUNDS AND AWARDS OF \$298,000 TO 127 STUDENTS WHICH ARE PAID TO THEIR RESPECTIVE EDUCATION INSTITUTIONS ON A SEMESTER OR QUARTERLY BASIS.

Form 990, Part III, Line 4c:

COMMUNITY INITIATIVES - THE FOUNDATION FOCUSES ITS EFFORTS ON SUPPORTING AND STAFFING 6 MAJOR INITIATIVES DESIGNED TO ENGAGE THE COMMUNITY IN BUILDING SOCIAL CAPITAL ASSETS, PROMOTING VOLUNTEER INVOLVEMENT ACTIVITIES FOR OVER 5,000 PEOPLE AND PROVIDING LEVERAGE TO GENERATE ADDITIONAL FUNDS FOR IDENTIFIED COMMUNITY ISSUES.

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2019
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
COMMUNITYGIVING

Employer identification number
36-3412544

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III.
If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Table with 7 columns: (a) 2015, (b) 2016, (c) 2017, (d) 2018, (e) 2019, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished; 4 Total; 5 The portion of total contributions by each person; 6 Public support.

Section B. Total Support

Table with 7 columns: (a) 2015, (b) 2016, (c) 2017, (d) 2018, (e) 2019, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities; 10 Other income; 11 Total support.

12 Gross receipts from related activities, etc. (see instructions) 12
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Row 14: Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) 14 66.070 %
Row 15: Public support percentage for 2018 Schedule A, Part II, line 14 15 64.920 %

16a 33 1/3% support test—2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
b 33 1/3% support test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
17a 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
b 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . .						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
c	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6.						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . .						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c	Add lines 10a and 10b.						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here.**

Section C. Computation of Public Support Percentage

15	Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2018 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

- 1** Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI). See instructions.			
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			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7:			
\$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

Additional Data

Software ID:

Software Version:

EIN: 36-3412544

Name: COMMUNITYGIVING

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No. 1545-0047
2019
Open to Public Inspection

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

Name of the organization
COMMUNITYGIVING

Employer identification number
36-3412544

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	335	
2 Aggregate value of contributions to (during year)	9,889,615	
3 Aggregate value of grants from (during year)	10,718,174	
4 Aggregate value at end of year	58,279,412	

- 5** Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? **Yes** **No**
- 6** Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? **Yes** **No**

Part II Conservation Easements.
Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

- 1** Purpose(s) of conservation easements held by the organization (check all that apply).
- Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area
- Protection of natural habitat Preservation of a certified historic structure
- Preservation of open space

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

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

- 3** Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____
- 4** Number of states where property subject to conservation easement is located ▶ _____
- 5** Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? **Yes** **No**
- 6** Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____
- 7** Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____
- 8** Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? **Yes** **No**
- 9** In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

- 1a** If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
- b** If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide 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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
- a** Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____
- b** Assets included in Form 990, Part X ▶ \$ _____

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . **Yes** **No**

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|--------|
| c Beginning balance | |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	48,860,373	45,466,309	37,202,312	32,330,272	34,027,806
b Contributions	1,900,880	2,385,114	6,570,039	1,834,289	652,553
c Net investment earnings, gains, and losses	1,412,829	3,183,251	4,161,871	4,555,134	1,344,588
d Grants or scholarships	1,731,978	1,476,284	1,846,943	959,431	2,636,479
e Other expenditures for facilities and programs	107,881	119,069	124,644	120,832	626,067
f Administrative expenses	627,652	578,948	496,326	437,120	432,129
g End of year balance	49,706,571	48,860,373	45,466,309	37,202,312	32,330,272

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶ 45.000 %
 - b** Permanent endowment ▶ 48.000 %
 - c** Temporarily restricted endowment ▶ 7.000 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|---------------|----|
| (i) unrelated organizations | 3a(i) | No |
| (ii) related organizations | 3a(ii) | No |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		109,941		109,941
b Buildings		810,399	287,555	522,844
c Leasehold improvements		14,994	10,260	4,734
d Equipment		185,312	150,941	34,371
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				671,890

Part VII Investments—Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests	108,833	F
(3) Other _____ (A) CASH SURRENDER VALUE-LIFE INSURANCE	834,618	F
(B) REAL ESTATE INVESTMENT	1,389,800	F
(C) CHARITABLE REMAINDER TRUST ASSETS	8,781,960	F
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	11,115,211	

Part VIII Investments—Program Related.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)		

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	

Part X Other Liabilities.

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

(a) Description of liability	(b) Book value
1. Federal income taxes	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	28,949,670

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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

1	Total revenue, gains, and other support per audited financial statements		1	16,001,425
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		-1,458,617
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		146,303
e	Add lines 2a through 2d		2e	-1,312,314
3	Subtract line 2e from line 1		3	17,313,739
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		-132,121
c	Add lines 4a and 4b		4c	-132,121
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	17,181,618

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

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

1	Total expenses and losses per audited financial statements		1	16,095,676
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		132,121
e	Add lines 2a through 2d		2e	132,121
3	Subtract line 2e from line 1		3	15,963,555
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		3,108,687
c	Add lines 4a and 4b		4c	3,108,687
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	19,072,242

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 36-3412544

Name: COMMUNITYGIVING

Supplemental Information

Return Reference	Explanation
PART V, LINE 4:	COMMUNITYGIVING ENDOWMENT FUNDS ARE SEPARATE FUNDS SET UP AT THE REQUEST OF THE DONOR, AGENCY OR GROUPS AND INTENDED TO BE A LONG-TERM INVESTMENT. PAYOUT OPTIONS INCLUDE A YEARLY PAYOUT OF THE EARNINGS FOR THE BENEFIT OF THE GROUP OR AGENCY. FOR OUR ENDOWED SCHOLARSHIP FUNDS THE ENDOWMENT IS SET UP TO BENEFIT STUDENTS THROUGH A COMPETITIVE PROCESS. ENDOWMENT FUNDS SET UP TO BENEFIT COMMUNITYGIVING ARE FUNDS HELD IN RESERVE FOR USE BY COMMUNITYGIVING OPERATIONS AND ONLY USED AT THE AUTHORIZATION OF THE COMMUNITYGIVING BOARD OF DIRECTORS.

Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	<p>THE FOUNDATION IS SUBJECT TO THE ACCOUNTING STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, WHICH ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS. UNDER THIS GUIDANCE, THE FOUNDATION MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE-LIKELY-THAN-NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION. THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT. THE GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ALSO ADDRESSES DE-RECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES ON INCOME TAXES, AND ACCOUNTING IN INTERIM PERIODS. MANAGEMENT EVALUATED THE TAX POSITIONS FOR THE FOUNDATION AND EACH OF THE CONSOLIDATED ENTITIES AND CONCLUDED THAT THE FOUNDATION HAD TAKEN NO UNCERTAIN INCOME TAX POSITIONS THAT REQUIRE ADJUSTMENTS TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE. THE FOUNDATION'S INCOME TAX RETURNS ARE SUBJECT TO EXAMINATION BY TAXING AUTHORITIES FOR A PERIOD OF THREE YEARS FROM THE DATE THEY ARE FILED.</p>

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS:	CHANGE IN VALUE OF TRUSTS 295,612. CHANGE IN VALUE OF LIFE INSURANCE -149,309.

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS:	RENTAL EXPENSE ON PART VIII LINE 6B -127,095. DIRECT EXPENSE OF FUNDRAISER OFFSETTING REVENUE -5,026.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS:	RENTAL EXPENSE ON PART VIII LINE 6B 127,095. DIRECT EXPENSE OF FUNDRAISER OFFSETTING REVENUE 5,026.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS:	FASB ASC 958-605 ADJUSTMENT 3,108,687.

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

2019

Open to Public Inspection

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

Department of the Treasury Internal Revenue Service

Name of the organization COMMUNITYGIVING

Employer identification number

36-3412544

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations e Solicitation of non-government grants f Solicitation of government grants g Special fundraising events 2a Did the organization have a written or oral agreement with any individual... 2b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements...

Table with 6 columns: (i) Name and address of individual or entity (fundraiser), (ii) Activity, (iii) Did fundraiser have custody or control of contributions?, (iv) Gross receipts from activity, (v) Amount paid to (or retained by) fundraiser listed in col. (i), (vi) Amount paid to (or retained by) organization. Includes a Total row at the bottom.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		DANCING W/ OUR STARS (event type)	(event type)	(total number)	(add col. (a) through col. (c))
1	Gross receipts	60,631			60,631
2	Less: Contributions	56,611			56,611
3	Gross income (line 1 minus line 2)	4,020			4,020
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	3,209			3,209
10	Direct expense summary. Add lines 4 through 9 in column (d) ▶				3,209
11	Net income summary. Subtract line 10 from line 3, column (d) ▶				811

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
		1	Gross revenue		
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d) ▶				
8	Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11** Does the organization conduct gaming activities with nonmembers? Yes No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13** Indicate the percentage of gaming activity conducted in:
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.

c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

- Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference	Explanation
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Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization COMMUNITYGIVING

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.

Employer identification number 36-3412544

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000.

Table with 8 columns: (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. Rows 1-12.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 317
3 Enter total number of other organizations listed in the line 1 table 1

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) EDUCATIONAL	53	198,075			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2:	THE ORGANIZATION MONITORS THE USE OF GRANT FUNDS BY A DESIGNATION ON THE CHECK STUB WHICH LISTS THE PURPOSE OF THE GRANT. A MEMO IS PROVIDED WITH EACH CHECK ISSUED WHICH SPECIFIES THE PURPOSE OF THE GRANT. THIS PROVIDES THE NONPROFIT WITH TWO METHODS OF DOCUMENTATION SO THEY ARE WELL AWARE OF THE GRANT PURPOSE OR DESIGNATION AS THEY RECEIVE THE CHECK INTO THEIR ORGANIZATION.

Additional Data

Software ID:
Software Version:
EIN: 36-3412544
Name: COMMUNITYGIVING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
180 DEGREES INC 1301 EAST 7TH STREET SAINT PAUL, MN 55106	23-7153536	501(C)(3)	5,000				GENERAL SUPPORT
510 ART LAB 510 SINCLAIR LEWIS AVENUE SAUK CENTRE, MN 56378	84-1960166	501(C)(3)	19,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
AFRICAN DEVELOPMENT CENTER 1931 SOUTH 5TH STREET MINNEAPOLIS, MN 55454	20-0553370	501(C)(3)	5,000				GENERAL SUPPORT
AKALA FAMILY FOUNDATION 226 WINKLER TRAIL SUITE 11 COLOGNE, MN 55322	84-3968240	501(C)(3)	10,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
ALBANY HIGH SCHOOL PO BOX 40 ALBANY, MN 56307	41-6003949		11,750				GENERAL SUPPORT
ALEXANDRIA AREA ARTS ASSOCIATION INC AKA ANDRIA THEATRE 618 BROADWAY STREET ALEXANDRIA, MN 56308	51-0171992	501(C)(3)	12,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
ALEXANDRIA AREA YMCA 110 KARL DRIVE ALEXANDRIA, MN 56308	20-2231427	501(C)(3)	17,500				GENERAL SUPPORT
ALEXANDRIA COVENANT CHURCH ALEXANDRIA MN 4005 DAKOTA STREET ALEXANDRIA, MN 56308	41-1455144	501(C)(3)	31,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
ALEXANDRIA SENIOR CITIZENS CENTER 414 HAWTHORNE STREET ALEXANDRIA, MN 56308	41-1375700	501(C)(3)	6,000				GENERAL SUPPORT
ALL SAINTS CATHOLIC CHURCH 411 NORTH 10TH STREET BRainerd, MN 56401	41-6443702	501(C)(3)	10,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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AMERICAN CANCER SOCIETY 1139 FRANKLIN AVE SUITE 5 SAUK RAPIDS, MN 56379	41-0724036	501(C)(3)	9,458				GENERAL SUPPORT
AMERICAN RED CROSS 1301 WEST SAINT GERMAIN STREET SAINT CLOUD, MN 56301	53-0196605	501(C)(3)	6,900				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ANNA MARIE'S ALLIANCE PO BOX 367 SAINT CLOUD, MN 56302	41-1344743	501(C)(3)	68,972				GENERAL SUPPORT
ASAMBLEA DE DERECHOS CIVILES 105 6TH AVENUE N WAITE PARK, MN 56387	84-1911183	501(C)(3)	5,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ASHLAR FOUNDATION 328 5TH STREET SW WILLMAR, MN 56201	83-2617203	501(C)(3)	15,000				GENERAL SUPPORT
ASSUMPTION HOME INC 715 NORTH 1ST STREET COLD SPRING, MN 56320	41-0873335	501(C)(3)	9,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ATWATER AREA LIVING AT HOME BLOCK NURSE PROGRAM PO BOX 64 ATWATER, MN 56209	46-1521787	501(C)(3)	7,331				GENERAL SUPPORT
BETHEL UNIVERSITY FOUNDATION 3900 BETHEL DRIVE SAINT PAUL, MN 55112	23-7094836	501(C)(3)	14,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BETHLEHEM LUTHERAN CHURCH 4310 COUNTY ROAD 137 SAINT CLOUD, MN 56301	41-0737233	501(C)(3)	37,700				GENERAL SUPPORT
BIG BROTHERS BIG SISTERS OF CENTRAL MN 203 COOPER AVENUE NORTH SUITE 162 SAINT CLOUD, MN 56303	41-0972056	501(C)(3)	83,817				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BLUE WATER THEATRE COMPANY PO BOX 662 WAYZATA, MN 55391	26-0707663	501(C)(3)	5,250				GENERAL SUPPORT
BOUNTIFUL BASKET FOOD SHELF OF EASTERN CARVER COUNTY 1600 BAVARIA ROAD CHASKA, MN 55318	84-2309087	501(C)(3)	6,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BOY SCOUTS OF AMERICA CENTRAL MN COUNCIL 1191 SCOUT DRIVE SARTELL, MN 56377	22-1576300	501(C)(3)	358,800				GENERAL SUPPORT
BOYS AND GIRLS CLUB OF DETROIT LAKES P O BOX 83 DETROIT LAKES, MN 56502	41-0871442	501(C)(3)	5,450				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BOYS AND GIRLS CLUBS OF CENTRAL MINNESOTA 345 30TH AVENUE NORTH SAINT CLOUD, MN 56303	41-1245177	501(C)(3)	1,307,692				GENERAL SUPPORT
BRainerd Family YMCA 602 OAK STREET BRainerd, MN 56401	41-0693938	501(C)(3)	262,487				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BRAINERD SCHOOL DISTRICT #181 804 OAK STREET BRAINERD, MN 56401	41-6000789		5,000				GENERAL SUPPORT
BRIDGES OF HOPE PO BOX 742 BRAINERD, MN 56401	72-1538846	501(C)(3)	6,800				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CALVARY LUTHERAN CHURCH 605 DOUGLAS STREET ALEXANDRIA, MN 56308	41-0721646	501(C)(3)	55,750				GENERAL SUPPORT
CAMP CONFIDENCE 1620 MARY FAWCETT MEMORIAL DRIVE WEST EAST GULL LAKE, MN 56401	41-0985513	501(C)(3)	8,500				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CAMP SHAMINEAU OF THE EVANGELICAL FREE CHURCH PO BOX 244 MOTLEY, MN 56466	41-0941920	501(C)(3)	25,000				GENERAL SUPPORT
CAMPHILL VILLAGE MINNESOTA INC 15136 CELTIC DRIVE SAUK CENTRE, MN 56378	41-1387425	501(C)(3)	53,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CAMPUS CRUSADE FOR CHRIST INC PO BOX 628222 ORLANDO, FL 32868	95-6006173	501(C)(3)	23,000				GENERAL SUPPORT
CARING FRIENDS NETWORK 8200 GRAND AVENUE SOUTH SUITE 700 BLOOMINGTON, MN 55420	47-4779336	501(C)(3)	10,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CARRIS HEALTH FOUNDATION 301 BECKER AVE SW WILLMAR, MN 56201	41-1611555	501(C)(3)	16,837				GENERAL SUPPORT
CARVER COUNTY VETERANS COUNCIL INC 660 EAST FOURTH STREET CHASKA, MN 55318	41-1762779	501(C)(3)	10,811				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CATHEDRAL HIGH SCHOOL 312 SEVENTH AVENUE NORTH SAINT CLOUD, MN 56303	41-0705763	501(C)(3)	1,107,849				GENERAL SUPPORT
CATHEDRAL HIGH SCHOOL EDUCATION FOUNDATION 312 7TH AVENUE NORTH SAINT CLOUD, MN 56303	41-1337318	501(C)(3)	39,118				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CATHOLIC CHARITIES 911 18TH STREET NORTH SAINT CLOUD, MN 56303	41-0737799	501(C)(3)	661,377				GENERAL SUPPORT
CATHOLIC CHARITIES OF THE RIO GRANDE VALLEY SAN JUAN OFFICE SAN JUAN, TX 78589	68-0599307	501(C)(3)	5,500				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CATHOLIC FOREIGN MISSION SOCIETY OF AMERICA INC PO BOX 302 MARYKNOLL, NY 10545	13-1740144	501(C)(3)	7,000				GENERAL SUPPORT
CATHOLIC FOUNDATION OF THE DIOCESE OF ST CLOUD 305 7TH AVENUE NORTH SUITE 104 SAINT CLOUD, MN 56302	41-1980683	501(C)(3)	12,700				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CATHOLIC UNITED FINANCIAL FOUNDATION 3499 LEXINGTON AVENUE NORTH SAINT PAUL, MN 55126	41-1893463	501(C)(3)	5,000				GENERAL SUPPORT
CENTER FOR VICTIMS OF TORTURE 2356 UNIVERSITY AVE W SUITE 430 SAINT PAUL, MN 55114	36-3383933	501(C)(3)	9,000				GENERAL SUPPORT

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CENTRACARE HEALTH FOUNDATION 1406 6TH AVENUE NORTH SAINT CLOUD, MN 56303	41-1855173	501(C)(3)	940,494				GENERAL SUPPORT
CENTRACARE HEALTH FOUNDATION - PAYNESVILLE 200 WEST 1ST STREET PAYNESVILLE, MN 56362	41-1855173	501(C)(3)	9,982				GENERAL SUPPORT

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CENTRAL GLOBAL VISION FUND 508 E 9TH AVENUE MILBANK, SD 57252	46-0381749	501(C)(3)	8,000				GENERAL SUPPORT
CENTRAL LAKES COLLEGE FOUNDATION 501 WEST COLLEGE DRIVE BRAINERD, MN 56401	23-7007111	501(C)(3)	7,000				GENERAL SUPPORT

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CENTRAL MINNESOTA HABITAT FOR HUMANITY 3335 WEST SAINT GERMAIN STREET SUITE 108 SAINT CLOUD, MN 56301	41-1634218	501(C)(3)	50,100				GENERAL SUPPORT
CENTRAL MINNESOTA MENTAL HEALTH CENTER 1321 NORTH 13TH STREET SAINT CLOUD, MN 56303	41-0873142	501(C)(3)	5,500				GENERAL SUPPORT

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CENTRAL MINNESOTA SEXUAL ASSAULT CENTER 15 RIVERSIDE DRIVE NORTHEAST SAINT CLOUD, MN 56304	41-1490431	501(C)(3)	18,657				GENERAL SUPPORT
CENTRAL MINNESOTA SUSTAINABILITY PROJECT PO BOX 7154 SAINT CLOUD, MN 56302	27-0698641	501(C)(3)	8,500				GENERAL SUPPORT

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CENTRAL MINNESOTA YOUTH FOR CHRIST 203 COOPER AVENUE NORTH 140 SAINT CLOUD, MN 56303	41-1336726	501(C)(3)	23,586				GENERAL SUPPORT
CENTRAL MINNESOTA YOUTH ORCHESTRA PO BOX 671 SAINT CLOUD, MN 56302	46-3233615	501(C)(3)	5,000				GENERAL SUPPORT

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CHASKA HISTORICAL SOCIETY INC 112 WEST 4TH STREET CHASKA, MN 55318	30-0219638	501(C)(3)	10,811				GENERAL SUPPORT
CHESTERTON ACADEMY 1320 MAINSTREET HOPKINS, MN 55343	38-3773629	501(C)(3)	12,500				GENERAL SUPPORT

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CHRIST CHURCH NEWMAN CENTER 396 FIRST AVENUE SOUTH SAINT CLOUD, MN 56301	41-0693981	501(C)(3)	13,669				GENERAL SUPPORT
CHRIST OUR LIGHT CATHOLIC CHURCH 804 7TH AVENUE SOUTH PRINCETON, MN 55371	27-2606585	501(C)(3)	15,000				GENERAL SUPPORT

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CHRISTAR INTERNATIONAL INC 1500 INTERNATIONAL PARKWAY SUITE 300 RICHARDSON, TX 75081	27-4567638	501(C)(3)	5,000				GENERAL SUPPORT
CHURCH OF SAINT PAUL 1125 NORTH 11TH AVENUE SAINT CLOUD, MN 56303	41-0693982	501(C)(3)	20,900				GENERAL SUPPORT

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CHURCH OF ST AUGUSTINE 442 2ND STREET SOUTHEAST SAINT CLOUD, MN 56304	41-0693981	501(C)(3)	7,256				GENERAL SUPPORT
CHURCH OF ST JOSEPH - ST JOSEPH MN 12 WEST MINNESOTA STREET SAINT JOSEPH, MN 56374	41-0693981	501(C)(3)	21,123				GENERAL SUPPORT

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CHURCH OF ST MICHAEL - ST CLOUD 1036 COUNTY ROAD 4 ST CLOUD, MN 56303	41-0693981	501(C)(3)	26,000				GENERAL SUPPORT
CHURCH RESOURCE MINISTRIES 1240 NORTH LAKEVIEW AVENUE SUITE 120 ANAHEIM, CA 92807	95-3523150	501(C)(3)	5,000				GENERAL SUPPORT

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CITY OF CAMBRIDGE 300 3RD AVENUE NE CAMBRIDGE, MN 55008	41-6005029		22,750				GENERAL SUPPORT
CITY OF CARVER 801 JONATHAN CARVER PARKWAY CARVER, MN 55315	41-6005037		10,000				GENERAL SUPPORT

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CITY OF COLOGNE 1221 VILLAGE PARKWAY COLOGNE, MN 55322	41-6005068		5,000				GENERAL SUPPORT
CITY OF NISSWA PO BOX 410 NISSWA, MN 56468	41-6005419		10,700				GENERAL SUPPORT

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CITY OF ST CLOUD 400 2ND STREET SOUTH SAINT CLOUD, MN 56301	41-6005515		164,900				GENERAL SUPPORT
CITY OF WAITE PARK 19 13TH AVENUE NORTH WAITE PARK, MN 56387	41-6005608		20,000				GENERAL SUPPORT

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CITY OF WILLMAR 333 SOUTHWEST 6TH STREET WILLMAR, MN 56201	41-6005645		5,000				GENERAL SUPPORT
COLD SPRING AREA HISTORICAL SOCIETY 527 MAIN STREET COLD SPRING, MN 56320	36-4607823	501(C)(3)	7,500				GENERAL SUPPORT

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COLLEGE OF SAINT BENEDICT SCHOENECKER COMMONS SAINT JOSEPH, MN 56374	41-0969244	501(C)(3)	204,517				GENERAL SUPPORT
COLLEGE OF SAINT SCHOLASTICA FINANCIAL AID OFFICE DULUTH, MN 55811	41-0698301	501(C)(3)	35,000				GENERAL SUPPORT

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COMMON GROUND UNITED METHODIST CHURCH 404 CYPRESS STREET NORTH CAMBRIDGE, MN 55008	41-1424643	501(C)(3)	11,000				GENERAL SUPPORT
COMMUNITY BASICS 1008 PLEASANTVIEW DRIVE SOUTHEAST WILLMAR, MN 56201	45-5234576	501(C)(3)	5,250				GENERAL SUPPORT

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COMMUNITY GRASSROOTS SOLUTIONS 110 2ND STREET SOUTH SUITE 236 WAITE PARK, MN 56387	27-2397534	501(C)(3)	5,000				GENERAL SUPPORT
CONCORDIA COLLEGE - MOORHEAD FINANCIAL AID MOORHEAD, MN 56562	41-0693977	501(C)(3)	5,000				GENERAL SUPPORT

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CRISIS NURSERY - LUTHERAN SOCIAL SERVICES 1205 6TH AVENUE SOUTH SAINT CLOUD, MN 56301	41-0872993	501(C)(3)	13,000				GENERAL SUPPORT
CRISIS PREGNANCY OF ALEXANDRIA PO BOX 822 ALEXANDRIA, MN 56308	41-1605555	501(C)(3)	7,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CROSIER FATHERS AND BROTHERS OF ONAMIA PO BOX 500 ONAMIA, MN 56359	41-0705826	501(C)(3)	18,196				GENERAL SUPPORT
CROW RIVER PLAYERS INC DBA THE LITTLE THEATRE OF NEW LONDON 24 CENTRAL AVE E NEW LONDON, MN 56273	41-1927142	501(C)(3)	5,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CUYUNA REGIONAL MEDICAL CENTER 320 EAST MAIN STREET CROSBY, MN 56441	41-0879376	501(C)(3)	5,000				GENERAL SUPPORT
DELASALLE HIGH SCHOOL 1 DELASALLE DRIVE MINNEAPOLIS, MN 55401	41-0705834	501(C)(3)	10,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
DESERT SKIES UNITED METHODIST CHURCH 32055 N HOUGHTON ROAD TUCSON, AZ 85749	86-0600352	501(C)(3)	9,100				GENERAL SUPPORT
DIOCESE OF PHOENIX PO BOX 52203 PHOENIX, AZ 85072	86-0223974	501(C)(3)	5,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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DIOCESE OF SAINT CLOUD PO BOX 1248 SAINT CLOUD, MN 56303	41-0693981	501(C)(3)	11,118				GENERAL SUPPORT
DIOCESE OF ST CLOUD- ANNUAL DIOCESAN APPEAL PO BOX 1538 SAINT CLOUD, MN 56302	41-0693981	501(C)(3)	27,300				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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DOCTORS WITHOUT BORDERS PO BOX 5030 HAGERSTOWN, MD 21741	13-3433452	501(C)(3)	8,026				GENERAL SUPPORT
DOUGLAS COUNTY CAR CARE PROGRAM 209 6TH AVENUE EAST ALEXANDRIA, MN 56308	46-1164691	501(C)(3)	7,500				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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DOUGLAS COUNTY OUTREACH FOOD SHELF 1205 LAKE STREET ALEXANDRIA, MN 56308	20-2556435	501(C)(3)	18,135				GENERAL SUPPORT
ELEVATE PREGNANCY & FAMILY RESOURCE CENTER 376 3RD STREET NE WAITE PARK, MN 56387	36-3448584	501(C)(3)	27,850				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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EMANUEL LUTHERAN SCHOOL 18155 CO ROAD 50 HAMBURG, MN 55339	41-0734771	501(C)(3)	11,622				GENERAL SUPPORT
EMILY UNITED METHODIST CHURCH 39994 WHITE PINE STREET EMILY, MN 56447	31-0839058	501(C)(3)	5,150				GENERAL SUPPORT

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EPILEPSY FOUNDATION OF MINNESOTA INC 1600 UNIVERSITY AVE W STE 300 ST PAUL, MN 55104	41-0874541	501(C)(3)	5,000				GENERAL SUPPORT
ESSENTIA HEALTH - ST JOSEPH'S FOUNDATION 523 NORTH 3RD STREET BRAINERD, MN 56401	41-0695602	501(C)(3)	25,000				GENERAL SUPPORT

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EVANGELICAL FREE CHURCH OF AMERICA 901 EAST 78TH STREET MINNEAPOLIS, MN 554201300	41-0721672	501(C)(3)	104,000				GENERAL SUPPORT
FAIRVIEW TOWNSHIP 11491 GULL LAKE DRIVE SW BRainerd, MN 56401	41-1310540		32,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FAITH BAPTIST CHURCH OF WESLEY CHAPEL INC 6300 OAKLEY BOULEVARD WESLEY CHAPEL, FL 33544	59-3611207	501(C)(3)	5,000				GENERAL SUPPORT
FAMILY PROMISE OF KANDIYOHI COUNTY 312 6TH STREET SW WILLMAR, MN 56201	30-0758513	501(C)(3)	5,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FEEDING AREA CHILDREN TOGETHER PO BOX 7832 SAINT CLOUD, MN 56302	82-2748058	501(C)(3)	35,414				GENERAL SUPPORT
FIDELITY CHARITABLE PO BOX 770001 CINCINNATI, OH 45277	11-0303001	501(C)(3)	105,000				GENERAL SUPPORT

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FILMNORTH 550 VANDALIA STREET 120 SAINT PAUL, MN 55114	41-1594894	501(C)(3)	5,000				GENERAL SUPPORT
FIRST BAPTIST CHURCH 1000 6TH ST SE WILLMAR, MN 56201	41-6080138	501(C)(3)	12,600				GENERAL SUPPORT

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FIRST BAPTIST CHURCH - LAKE REGION CHRISTIAN SCHOOL 7398 FAIRVIEW ROAD BAXTER, MN 56425	41-6029149	501(C)(3)	13,000				GENERAL SUPPORT
FIRST LUTHERAN CHURCH 1655 18TH AVENUE EAST ALEXANDRIA, MN 56308	41-6008707	501(C)(3)	41,745				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FIRST LUTHERAN CHURCH OF SAUK CENTRE 304 ELM STREET SOUTH SAUK CENTRE, MN 56378	36-3514261	501(C)(3)	7,200				GENERAL SUPPORT
FIRST UNITED METHODIST CHURCH 1107 PINE CONE ROAD SOUTH SARTELL, MN 56377	41-0842882	501(C)(3)	34,176				GENERAL SUPPORT

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FOCUS ON THE FAMILY 8605 EXPLORER DRIVE COLORADO SPRINGS, CO 80995	95-3188150	501(C)(3)	13,000				GENERAL SUPPORT
FRANCISCAN SISTERS OF LITTLE FALLS 116 8TH AVENUE SE LITTLE FALLS, MN 56345	41-0695518	501(C)(3)	36,044				GENERAL SUPPORT

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FRASER 2400 W 64TH ST RICHFIELD, MN 55423	41-0781858	501(C)(3)	5,250				GENERAL SUPPORT
FRIENDS OF CAREER SOLUTIONS 1542 NORTHWAY DRIVE SAINT CLOUD, MN 56303	82-1354223	501(C)(3)	5,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FRIENDS OF THE MISSISSIPPI RIVER 101 EAST 5TH STREET SUITE 2000 SAINT PAUL, MN 55101	41-1763226	501(C)(3)	5,000				GENERAL SUPPORT
GABRIEL MEDIA 1926 W DIVISION ST SAINT CLOUD, MN 56302	27-3932860	501(C)(3)	14,850				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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GALILEE CENTER PO BOX 308 MECCA, CA 92254	27-3133601	501(C)(3)	7,000				GENERAL SUPPORT
GIFT OF LIFE TRANSPLANT HOUSE 705 SECOND STREET SW ROCHESTER, MN 55902	41-1495845	501(C)(3)	20,000				GENERAL SUPPORT

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GIRL SCOUTS OF MN & WI LAKES & PINES COUNCIL 400 2ND AVENUE SOUTH WAITE PARK, MN 56387	41-0877820	501(C)(3)	39,509				GENERAL SUPPORT
GLOBAL DEVELOPERS NETWORK DBA MINISTRY DEVELOPERS NETWORK PO BOX 3115 RIVERVIEW, FL 33568	02-0811643	501(C)(3)	5,000				GENERAL SUPPORT

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GLOBAL I E PO BOX 631006 HIGHLANDS RANCH, CO 80163	84-1167459	501(C)(3)	5,000				GENERAL SUPPORT
GOOD SHEPHERD COMMUNITY 1115 NORTH 4TH AVENUE SAUK RAPIDS, MN 56379	41-0851905	501(C)(3)	5,500				GENERAL SUPPORT

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GOODWILL EASTER SEALSEASTER SEALS MINNESOTA 553 FAIRVIEW AVENUE NORTH SAINT PAUL, MN 55104	41-0706171	501(C)(3)	8,000				GENERAL SUPPORT
GRACE UNITED METHODIST OF PAYNESVILLE 500 BUSINESS 23 WEST PAYNESVILLE, MN 56362	41-0757853	501(C)(3)	6,000				GENERAL SUPPORT

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GREAT RIVER CHILDREN'S MUSEUM 1126 7TH AVENUE NORTH SAINT CLOUD, MN 56303	30-0716191	501(C)(3)	41,200				GENERAL SUPPORT
GREAT RIVER REGIONAL LIBRARY 1300 WEST SAINT GERMAIN STREET SAINT CLOUD, MN 56301	41-0976030		10,413				GENERAL SUPPORT

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GREAT THEATRE 710 SUNDIAL DRIVE WAITE PARK, MN 56387	41-1909918	501(C)(3)	66,210				GENERAL SUPPORT
GREATER ST CLOUD PUBLIC SAFETY 101 11TH AVENUE NORTH SAINT CLOUD, MN 56301	47-5625865	501(C)(3)	5,000				GENERAL SUPPORT

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GREATER ST CLOUD PUBLIC SAFETY FOUNDATION 101 11TH AVENUE NORTH SAINT CLOUD, MN 56303	47-5625865	501(C)(3)	5,000				GENERAL SUPPORT
GREEN LAKE LUTHERAN MINISTRIES 9916 LAKE AVE SOUTH SPICER, MN 56288	41-0726172	501(C)(3)	11,000				GENERAL SUPPORT

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GUSTAVUS ADOLPHUS COLLEGE 800 W COLLEGE AVENUE SAINT PETER, MN 56082	41-0695524	501(C)(3)	200,000				GENERAL SUPPORT
HABITAT FOR HUMANITY OF DOUGLAS COUNTY 1211 NORTH NOKOMIS NE ALEXANDRIA, MN 56308	41-1869669	501(C)(3)	11,150				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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HABITAT FOR HUMANITY OF WEST CENTRAL MINNESOTA 2424 SOUTH 1ST STREET WILLMAR, MN 56201	41-1726284	501(C)(3)	14,148				GENERAL SUPPORT
HAMBURG BASEBALL CLUB INC 401 SOPHIA AVENUE HAMBURG, MN 55339	41-1287810	501(C)(3)	10,000				GENERAL SUPPORT

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HAMLIN UNIVERSITY 1536 HEWITT AVENUE MSC1915 SAINT PAUL, MN 55104	41-0693960	501(C)(3)	16,000				GENERAL SUPPORT
HANDS ACROSS THE WORLD 1605 GOETTENS WAY 206 SAINT CLOUD, MN 56301	68-0576502	501(C)(3)	6,000				GENERAL SUPPORT

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HILL MUSEUM & MANUSCRIPT LIBRARY PO BOX 7300 COLLEGEVILLE, MN 56321	41-0693973	501(C)(3)	15,566				GENERAL SUPPORT
HILLTOP CHAPEL CHURCH 49448 OSPREY AVENUE PALISADE, MN 56469	26-1969630	501(C)(3)	10,000				GENERAL SUPPORT

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HOLY CROSS LUTHERAN CHURCH 2555 CLEARWATER ROAD SAINT CLOUD, MN 56301	41-0958310	501(C)(3)	11,200				GENERAL SUPPORT
HOLY FAMILY ACADEMY 5925 WEST LAKE STREET SAINT LOUIS PARK, MN 55416	41-0804986	501(C)(3)	12,000				GENERAL SUPPORT

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HOLY FAMILY SCHOOL 231 SINCLAIR LEWIS AVE SAUK CENTRE, MN 56378	41-0880296	501(C)(3)	62,964				GENERAL SUPPORT
HOMELESS HELPING HOMELESS PO BOX 475 SAINT CLOUD, MN 56302	83-3481077	501(C)(3)	5,250				GENERAL SUPPORT

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HUNGER SOLUTIONS MINNESOTA 555 PARK STREET SUITE 400 SAINT PAUL, MN 55103	36-3567366	501(C)(3)	5,450				GENERAL SUPPORT
HUNTSMANS FOUNDATION INC 2399 MT LEBANON CHURCH ROAD GREENSBURG, KY 42743	83-4183825	501(C)(3)	16,000				GENERAL SUPPORT

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IMMANUEL LUTHERAN CHURCH 300 S 3RD STREET ATWATER, MN 56209	41-6057521	501(C)(3)	30,575				GENERAL SUPPORT
INDEPENDENT LIFESTYLES INC 215 NORTH BENTON DRIVE SAUK RAPIDS, MN 56379	41-1871141	501(C)(3)	5,000				GENERAL SUPPORT

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INITIATIVE FOUNDATION 405 FIRST STREET SE LITTLE FALLS, MN 56345	36-3451562	501(C)(3)	19,500				GENERAL SUPPORT
INSTITUTE OF ASIAN CULTURE AND DEVELOPMENT 800 AIRPORT BLVD STE 300 BURLINGAME, CA 94010	95-4612128	501(C)(3)	40,000				GENERAL SUPPORT

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INTERNATIONAL MESSENGERS 110 ORCHARD CT CLEAR LAKE, IA 50428	41-1652782	501(C)(3)	45,000				GENERAL SUPPORT
ISLAMIC CENTER OF ST CLOUD 712 17TH AVENUE SOUTH SAINT CLOUD, MN 56301	41-2004117	501(C)(3)	10,750				GENERAL SUPPORT

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JUNIOR ACHIEVEMENT OF THE UPPER MIDWEST INC 3515 3RD STREET NORTH SAINT CLOUD, MN 56302	41-1424988	501(C)(3)	15,000				GENERAL SUPPORT
KANDIYOHI COUNTY AND CITY OF WILLMAR ECONOMIC DEVELOPMENT COMMISSION 222 20TH STREET SE WILLMAR, MN 56201	05-0593243		7,500				GENERAL SUPPORT

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KANDIYOHI COUNTY AREA FAMILY YMCA 1000 LAKELAND DRIVE SE WILLMAR, MN 56201	41-1908049	501(C)(3)	27,750				GENERAL SUPPORT
KANDIYOHI COUNTY FOOD SHELF 624 PACIFIC AVENUE SW WILLMAR, MN 56201	41-1432367	501(C)(3)	22,529				GENERAL SUPPORT

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KANDIYOHI COUNTY HEALTH AND HUMAN SERVICES 2200 23RD STREET NORTHEAST WILLMAR, MN 56201	41-6005818		5,000				GENERAL SUPPORT
KIDS FIGHTING HUNGER OF CENTRAL MINNESOTA PO BOX 7550 SAINT CLOUD, MN 56302	20-0175197	501(C)(3)	5,350				GENERAL SUPPORT

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KINSHIP PARTNERS OF BRAINERD 804 OAK STREET SUITE 201 BRAINERD, MN 56401	36-3477485	501(C)(3)	28,000				GENERAL SUPPORT
KIWANIS CLUB OF SAINT CLOUD PO BOX 1472 SAINT CLOUD, MN 56302	41-0777417	501(C)(4)	6,000				GENERAL SUPPORT

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KNUTE NELSON FOUNDATION 420 12TH AVENUE EAST ALEXANDRIA, MN 56308	41-1451486	501(C)(3)	5,500				GENERAL SUPPORT
LAESTADIAN LUTHERAN CHURCH - MENAHGA MN 25 JUNIPER AVE NW MENAHGA, WI 56464	41-1225152	501(C)(3)	5,000				GENERAL SUPPORT

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LAKES AREA MUSIC FESTIVAL PO BOX 96 BRainerd, MN 56401	45-4807315	501(C)(3)	10,000				GENERAL SUPPORT
LAKES AREA PREGNANCY SUPPORT CENTER 315 EAST RIVER ROAD BRainerd, MN 56401	41-1795735	501(C)(3)	5,500				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
LAKEWOOD EVANGELICAL FREE CHURCH 6284 FAIRVIEW RD BAXTER, MN 56425	41-1504649	501(C)(3)	51,000				GENERAL SUPPORT
LAND INSTITUTE 2440 E WATER WELL RD SALINA, KS 674019051	48-0842156	501(C)(3)	10,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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LAND STEWARDSHIP PROJECT 821 EAST 35TH STREET SUITE 200 MINNEAPOLIS, MN 55407	41-1466054	501(C)(3)	17,512				GENERAL SUPPORT
LAUNCH MINISTRY 110 WEST 2ND STREET CHASKA, MN 55318	26-4579522	501(C)(3)	5,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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LEGACY OF THE LAKES MUSEUM PO BOX 1216 ALEXANDRIA, MN 56308	41-1967683	501(C)(3)	8,250				GENERAL SUPPORT
LEGAL SERVICES OF NORTHWEST MINNESOTA 1015 7TH AVENUE NORTH MOORHEAD, MN 565610838	41-1291705	501(C)(3)	5,000				GENERAL SUPPORT

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LIFE ASSEMBLY OF GOD 2409 CLEARWATER ROAD ST CLOUD, MN 56301	44-0577787	501(C)(3)	7,000				GENERAL SUPPORT
LITTLE FALLS COMMUNITY HIGH SCHOOL 1001 FIFTH AVENUE SE LITTLE FALLS, MN 56345	41-6002411		5,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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LIVING LEGACY INTERNATIONAL PO BOX 22220 KNOXVILLE, TN 37933	20-5720006	501(C)(3)	15,000				GENERAL SUPPORT
LOCAL EDUCATION & ACTIVITIES FOUNDATION (LEAF) PO BOX 1132 SAINT CLOUD, MN 56302	41-1770753	501(C)(3)	117,293				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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LOVE INC OF EASTERN CARVER COUNTY 1600 BAVARIA ROAD CHASKA, MN 55318	20-5544147	501(C)(3)	5,000				GENERAL SUPPORT
LOVE INC OF DOUGLAS COUNTY LAKES AREA 44 GLENN ROAD NW ALEXANDRIA, MN 56308	20-8963495	501(C)(3)	20,750				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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LUTHERAN SOCIAL SERVICES 507 22ND AVENUE SOUTH STE 1 ALEXANDRIA, MN 56308	41-0872993	501(C)(3)	10,000				GENERAL SUPPORT
LUTHERAN SOCIAL SERVICES OF MINNESOTA 2485 COMO AVENUE SAINT PAUL, MN 55108	41-0872993	501(C)(3)	5,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MAYO FOUNDATION 200 FIRST STREET SW ROCHESTER, MN 55905	41-0944601	501(C)(3)	308,166				GENERAL SUPPORT
MID-MINNESOTA WOMEN'S CENTER 2602 OAK STREET BRainerd, MN 56401	41-1324087	501(C)(3)	8,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MINNESOTA LAND TRUST 2356 UNIVERSITY AVE W SUITE 240 ST PAUL, MN 55114	41-1713652	501(C)(3)	26,000				GENERAL SUPPORT
MINNESOTA PUBLIC RADIO 480 CEDAR STREET SAINT PAUL, MN 551012217	41-0953924	501(C)(3)	7,576				GENERAL SUPPORT

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MINNESOTA TEEN CHALLENGE INC 2424 BUSINESS 371 BRAINERD, MN 56401	41-1517351	501(C)(3)	10,900				GENERAL SUPPORT
MN CITIZENS CONCERNED FOR LIFE INC EDUCATION FUND 4249 NICOLLET AVENUE S MINNEAPOLIS, MN 55409	51-0164086	501(C)(3)	10,300				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MN DISTRICT COUNCIL OF THE ASSEMBLY OF GOD 1315 PORTLAND AVENUE SOUTH MINNEAPOLIS, MN 55404	41-0846690	501(C)(3)	6,134				GENERAL SUPPORT
MNYOU 1105 DANA DRIVE SE WILLMAR, MN 56201	82-3672281	501(C)(3)	20,000				GENERAL SUPPORT

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MOUNT CARMEL MINISTRIES PO BOX 579 ALEXANDRIA, MN 56308	41-1577937	501(C)(3)	30,550				GENERAL SUPPORT
NORTH CENTRAL DISTRICT EFCA 711 10TH AVENUE SOUTH MINNEAPOLIS, MN 55415	41-0721674	501(C)(3)	95,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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NORTH DAKOTA STATE UNIVERSITY NDSU DEPT 2836 FARGO, ND 58108	45-6002439		500				GENERAL SUPPORT
NORTH HENNEPIN COMMUNITY COLLEGE FOUNDATION 7411 85TH AVENUE N BROOKLYN PARK, MN 55445	41-1431459	501(C)(3)	10,000				GENERAL SUPPORT

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NORTHSTAR CHRISTIAN ACADEMY 3888 PIONEER RD SE ALEXANDRIA, MN 56308	47-4231309	501(C)(3)	692,500				GENERAL SUPPORT
OASIS WORLD MINISTRIES PO BOX 2244 MAPLE GROVE, MN 55311	41-1954218	501(C)(3)	200,000				GENERAL SUPPORT

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ORPHAN'S HOPE INTERNATIONAL 2570 NE NOBLE LOOP EAST WENATCHEE, WA 98802	20-0052012	501(C)(3)	104,500				GENERAL SUPPORT
OUR LADY OF LOURDES 208 BROADWAY WEST LITTLE FALLS, MN 56345	41-0773798	501(C)(3)	6,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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OUR LADY OF LOURDES CATHOLIC CHURCH 19002 N 128TH AVENUE SUN CITY WEST, AZ 85375	94-3454581	501(C)(3)	5,000				GENERAL SUPPORT
OUR LADY OF THE ANGELS CATHOLIC CHURCH - SAUK CENTRE 304 SINCLAIR LEWIS AVE SAUK CENTRE, MN 56378	41-0693981	501(C)(3)	123,750				GENERAL SUPPORT

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OUR LADY OF THE LAKES - PEQUOT LAKES PO BOX 759 PEQUOT LAKES, MN 56472	41-1605365	501(C)(3)	198,000				GENERAL SUPPORT
OUR SAVIORS LUTHERAN CHURCH PO BOX 670 ALBANY, MN 56307	41-1466293	501(C)(3)	42,000				GENERAL SUPPORT

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OUTDOOR EXPERIENCE INC 12826 S 38TH PLACE PHOENIX, AZ 85044	26-3729565	501(C)(3)	5,000				GENERAL SUPPORT
OUTREACH PROGRAM OF BRainerd LAKES 24489 HAZELWOOD DR NISSWA, MN 56468	45-4530236	501(C)(3)	40,300				GENERAL SUPPORT

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PACT 4 FAMILIES COLLABORATIVE 2200 23RD ST WILLMAR, MN 56201	41-1857830	501(C)(3)	5,000				GENERAL SUPPORT
PARAMOUNT CENTER FOR THE ARTS 913 WEST SAINT GERMAIN STREET SAINT CLOUD, MN 56301	41-1809017	501(C)(3)	28,500				GENERAL SUPPORT

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PARKS FOREVER INC PO BOX 417 COLD SPRING, MN 56320	26-3346242	501(C)(3)	5,000				GENERAL SUPPORT
PATHWAYS 4 YOUTH-ST CLOUD ROTARY FDN C/O ST CLOUD ROTARY FOUNDATION SAINT CLOUD, MN 56303	36-3396376	501(C)(3)	99,787				GENERAL SUPPORT

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PAYNESVILLE AREA SCHOOL DISTRICT #741 217 WEST MILL STREET PAYNESVILLE, MN 56362	41-6004060		7,140				GENERAL SUPPORT
PELKIE LAESTADIAN CHURCH 22399 BROEMER ROAD CHASSELL, MI 49916	38-2489698	501(C)(3)	5,000				GENERAL SUPPORT

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PHOENIX LAESTADIAN LUTHERAN CHURCH 32424 N 43RD STREET CAVE CREEK, AZ 85331	86-0444000	501(C)(3)	5,000				GENERAL SUPPORT
PLACE OF HOPE 511 9TH AVENUE NORTH SAINT CLOUD, MN 56303	41-1870347	501(C)(3)	16,750				GENERAL SUPPORT

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PLANNED PARENTHOOD NORTH CENTRAL STATES 671 VANDALIA STREET SAINT PAUL, MN 55114	83-0614523	501(C)(3)	5,000				GENERAL SUPPORT
PLANNED PARENTHOOD OF MINNESOTA-SOUTH DAKOTA 671 VANDALIA ST SAINT PAUL, MN 55114	41-0948382	501(C)(3)	29,000				GENERAL SUPPORT

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POOR CLARES MONASTERY 421 4TH STREET SOUTH SAUK RAPIDS, MN 56379	41-1603788	501(C)(3)	25,932				GENERAL SUPPORT
PRIESTS FOR LIFE PO BOX 23669 COCOA, FL 32923	94-3123315	501(C)(3)	10,000				GENERAL SUPPORT

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PRISON FELLOWSHIP 44180 RIVERSIDE PARKWAY LANDSDOWNE, VA 20176	62-0988294	501(C)(3)	5,000				GENERAL SUPPORT
PROMISE NEIGHBORHOOD OF CENTRAL MN PO BOX 6082 SAINT CLOUD, MN 56302	45-3233276	501(C)(3)	29,200				GENERAL SUPPORT

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QUIET OAKS HOSPICE HOUSE 5537 GALAXY ROAD SAINT CLOUD, MN 56301	20-3905841	501(C)(3)	104,854				GENERAL SUPPORT
RAVI ZACHARIAS INTERNATIONAL MINISTRIES 3755 MANSELL ROAD ALPHARETTA, GA 30022	13-3200719	501(C)(3)	20,500				GENERAL SUPPORT

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REDEEMER LUTHERAN CHURCH 1401 6TH ST SW WILLMAR, MN 56201	41-0956958	501(C)(3)	23,300				GENERAL SUPPORT
RIDGEWATER COLLEGE ATT FOUNDATION WILLMAR, MN 56201	41-1847315	501(C)(3)	101,750				GENERAL SUPPORT

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RIDGEWATER COLLEGE FOUNDATION 2101 15TH AVE NW WILLMAR, MN 56201	41-1847315	501(C)(3)	19,557				GENERAL SUPPORT
RISING HOPE FOUNDATION PO BOX 841 PARK RAPIDS, MN 56470	45-3566370	501(C)(3)	7,000				GENERAL SUPPORT

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RIVER VALLEY HEALTH SERVICES 303 EAST 6TH STREET CHASKA, MN 55318	20-2886410	501(C)(3)	5,000				GENERAL SUPPORT
ROCORI AREA DOLLARS FOR SCHOLARS PO BOX 304 COLD SPRING, MN 56320	04-2296967	501(C)(3)	5,500				GENERAL SUPPORT

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RONALD MCDONALD HOUSE CHARITIES UPPER MIDWEST 818 FULTON STREET SE MINNEAPOLIS, MN 55414	41-1313107	501(C)(3)	6,679				GENERAL SUPPORT
ROTARY 5950 FOUNDATION PO BOX 2158 BURNSVILLE, MN 55337	20-1365543	501(C)(3)	6,000				GENERAL SUPPORT

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RUNESTONE MUSEUM FOUNDATION 206 BROADWAY STREET ALEXANDRIA, MN 56308	23-7391175	501(C)(3)	5,000				GENERAL SUPPORT
SAFE AVENUES PO BOX 568 WILLMAR, MN 56201	41-1931304	501(C)(3)	69,000				GENERAL SUPPORT

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SAINT CLOUD FIREWORKS COMMITTEE C/O GRAY PLANT MOOTY SAINT CLOUD, MN 56301	46-2790141	501(C)(3)	11,000				GENERAL SUPPORT
SAINT JOHN'S ABBEY OSB 2900 ABBEY PLAZA COLLEGEVILLE, MN 56321	41-0693973	501(C)(3)	5,710				GENERAL SUPPORT

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SAINT JOHN'S LUTHERAN CHURCH 42695 WASHINGTON STREET PALM DESERT, CA 92211	51-0155905	501(C)(3)	6,500				GENERAL SUPPORT
SAINT JOHN'S UNIVERSITY 2850 ABBEY PLAZA COLLEGEVILLE, MN 56321	41-0693973	501(C)(3)	140,406				GENERAL SUPPORT

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SAINT PAUL OPEN SCHOOL PTO 640 HUMBOLDT AVE SAINT PAUL, MN 551072967	26-4180176	501(C)(3)	11,000				GENERAL SUPPORT
SALEM LUTHERAN CHURCH PO BOX 100 DEERWOOD, MN 56444	41-1463989	501(C)(3)	49,500				GENERAL SUPPORT

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SALEM LUTHERAN ELCA 90 RIVERSIDE DRIVE SE SAINT CLOUD, MN 56304	41-1568278	501(C)(3)	6,000				GENERAL SUPPORT
SALVATION ARMY - BRAINERD PO BOX 385 BRAINERD, MN 56401	36-2167910	501(C)(3)	17,382				GENERAL SUPPORT

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SALVATION ARMY - NORTHERN DIVISION 2445 PRIOR AVENUE N ROSEVILLE, MN 55113	41-0698597	501(C)(3)	6,500				GENERAL SUPPORT
SALVATION ARMY - ST CLOUD 400 HIGHWAY 10 SOUTH SAINT CLOUD, MN 56304	41-0698597	501(C)(3)	106,983				GENERAL SUPPORT

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SALVATION ARMY OF KANDIYOHI COUNTY 521 SW 4TH STREET WILLMAR, MN 56201	41-0698597	501(C)(3)	44,586				GENERAL SUPPORT
SAMARITANS PURSE PO BOX 3000 BOONE, NC 28607	58-1437002	501(C)(3)	21,500				GENERAL SUPPORT

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SARTELL-ST STEPHEN EDUCATION FOUNDATION PO BOX 258 SARTELL, MN 56377	41-1878506	501(C)(3)	102,500				GENERAL SUPPORT
SARTELL-ST STEPHEN SCHOOL DISTRICT 212 3RD AVE N SARTELL, MN 56377	41-6003908		6,458				GENERAL SUPPORT

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAUK CENTRE SCHOOL DISTRICT 903 STATE ROAD SAUK CENTRE, MN 56378	41-6004061		57,024				GENERAL SUPPORT
SCHWAB CHARITABLE FUND PO BOX 628298 ORLANDO, FL 32862	31-1640316	501(C)(3)	141,165				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
SCOTT-CARVER OLD THRESHERS ASSOCIATION PO BOX 44 JORDON, MN 55352	41-0919064	501(C)(3)	10,811				GENERAL SUPPORT
SEBEKA SCHOOL DISTRICT #820 200 1ST STREET NW SEBEKA, MN 56477	41-6008628		5,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
SECOND HARVEST HEARTLAND 7101 WINNETKA AVENUE N BROOKLYN PARK, MN 55428	23-7417654	501(C)(3)	5,800				GENERAL SUPPORT
SHARING AND CARING HANDS INC 525 N SEVENTH STREET MINNEAPOLIS, MN 55405	36-3412619	501(C)(3)	14,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
SHARING BREAD SOUP KITCHEN 923 OAK STREET BRainerD, MN 56401	41-1634222	501(C)(3)	5,300				GENERAL SUPPORT
SHERBURNE HISTORY CENTER 10775 27TH AVENUE SE BECKER, MN 55308	41-1362450	501(C)(3)	35,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
SINCLAIR LEWIS FOUNDATION INC PO BOX 25 SAUK CENTRE, MN 56378	41-6040034	501(C)(3)	45,918				GENERAL SUPPORT
SISTERS OF ST JOSEPH MINISTRIES FUND 1884 RANDOLPH AVENUE SAINT PAUL, MN 55105	41-1765361	501(C)(3)	5,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
SISTERS OF THE ORDER OF SAINT BENEDICT 104 CHAPEL LANE SAINT JOSEPH, MN 56374	41-0693973	501(C)(3)	36,750				GENERAL SUPPORT
SOCIETY FOR THE PROPAGATION OF THE FAITH 11 8TH AVENUE SOUTH SAINT CLOUD, MN 56301	41-0706919	501(C)(3)	8,971				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
SOMEPLACE SAFE 700 CEDAR STREET SUITE 237 ALEXANDRIA, MN 56308	41-1358654	501(C)(3)	11,000				GENERAL SUPPORT
ST AGNES CATHOLIC CHURCH PO BOX 874 WALKER, MN 564840874	41-1941181	501(C)(3)	12,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
ST CLARE OF ASSISI 17111 W BELL ROAD SURPRISE, AZ 85374	35-2350848	501(C)(3)	10,000				GENERAL SUPPORT
ST CLOUD AREA FAMILY YMCA 2001 STOCKINGER DRIVE SAINT CLOUD, MN 56303	41-0952420	501(C)(3)	152,252				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ST CLOUD AREA SCHOOL DISTRICT 742 1201 SOUTH 2ND STREET WAITE PARK, MN 56387	41-6003926		11,957				GENERAL SUPPORT
ST CLOUD CHRISTIAN SCHOOL 430 3RD AVENUE NE SAINT CLOUD, MN 56304	41-1414289	501(C)(3)	21,163				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
ST CLOUD DOWNTOWN COUNCIL & ALLIANCE FOUNDATION 501 WEST SAINT GERMAIN STREET SUITE 102 SAINT CLOUD, MN 56301	45-0668969	501(C)(3)	6,000				GENERAL SUPPORT
ST CLOUD POLICE DEPARTMENT 101 11TH AVE N ST CLOUD, MN 56303	41-6005515		5,827				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
ST CLOUD SOMALI YOUTH ORGANIZATION PO BOX 6131 SAINT CLOUD, MN 56302	47-2581653	501(C)(3)	7,500				GENERAL SUPPORT
ST CLOUD STATE UNIVERSITY BUSINESS SERVICES OFFICE - AS 123 ST CLOUD, MN 56301	41-1687554		1,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
ST CLOUD STATE UNIVERSITY FOUNDATION LEWIS HOUSE SAINT CLOUD, MN 563014498	41-6019040	501(C)(3)	178,119				GENERAL SUPPORT
ST CLOUD SYMPHONY ORCHESTRA PO BOX 234 SAINT CLOUD, MN 56302	51-0191872	501(C)(3)	5,235				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ST CLOUD TECHNICAL & COMMUNITY COLLEGE 1540 NORTHWAY DRIVE SAINT CLOUD, MN 56303	41-1687554		1,000				GENERAL SUPPORT
ST CLOUD TECHNICAL & COMMUNITY COLLEGE FOUNDATION 1215 15TH STREET NORTH SAINT CLOUD, MN 56303	41-1791598	501(C)(3)	80,341				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
ST FRANCIS XAVIER CHURCH 219 - 2ND STREET NORTH SARTELL, MN 56377	53-0196617	501(C)(3)	51,487				GENERAL SUPPORT
ST ISABEL CATHOLIC CHURCH 3559 SANIBEL-CAPTIVA ROAD SANIBEL, FL 339573036	27-1988145	501(C)(3)	9,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
ST JOHN CANTIUS CHURCH 1515 3RD STREET NORTH SAINT CLOUD, MN 56303	41-0693981	501(C)(3)	19,882				GENERAL SUPPORT
ST JOHN'S CHURCH - ORTONVILLE 421 MADISON AVENUE ORTONVILLE, MN 56278	41-0785164	501(C)(3)	10,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
ST JOHN'S PREPARATORY SCHOOL 1857 WATERTOWER ROAD COLLEGEVILLE, MN 56321	41-0693973	501(C)(3)	10,487				GENERAL SUPPORT
ST JOSEPH COMMUNITY FOOD SHELF PO BOX 384 SAINT JOSPEH, MN 56374	41-2021124	501(C)(3)	32,157				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
ST MARY'S CATHOLIC CHURCH 713 12TH ST SW WILLMAR, MN 56201	53-0196617	501(C)(3)	18,700				GENERAL SUPPORT
ST MARY'S CHURCH 402 2ND STREET SE MELROSE, MN 56352	41-0824193	501(C)(3)	30,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
ST PAUL'S CATHOLIC CHURCH - SAUK CENTRE 304 SINCLAIR LEWIS AVE SAUK CENTRE, MN 56378	41-0693981	501(C)(3)	188,000				GENERAL SUPPORT
STEARNS CO PARKSQUARRY PARKS 1802 CO ROAD 137 WAITE PARK, MN 56387	41-6005899		39,519				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
STEARNS COUNTY HISTORICAL SOCIETY 235 33RD AVENUE SOUTH SAINT CLOUD, MN 56301	41-1315033	501(C)(3)	26,273				GENERAL SUPPORT
STEARNS COUNTY SHERIFF'S DEPARTMENT 807 COURTHOUSE SQUARE SAINT CLOUD, MN 56302	41-6005899		5,897				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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TENTMAKERS YOUTH MINISTRY PO BOX 84 CHANHASSEN, MN 55317	41-1315524	501(C)(3)	35,000				GENERAL SUPPORT
TEREBINTH REFUGE 110 2ND STREET S STE 231 WAITE PARK, MN 56387	81-3807059	501(C)(3)	36,800				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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THE CEDAR CULTURAL CENTER INC 416 CEDAR AVENUE SOUTH MINNEAPOLIS, MN 55454	41-1669156	501(C)(3)	12,000				GENERAL SUPPORT
THE CHURCH IN THE PINES 3992 HWY 27 WEST ALEXANDRIA, MN 56308	81-0928385	501(C)(3)	10,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
THE CHURCH OF ST MARY 420 IRVING STREET ALEXANDRIA, MN 56308	41-0724059	501(C)(3)	135,686				GENERAL SUPPORT
THE LINK OF NORTHERN KANDIYOHI COUNTY 206 MAIN STREET NORTH NEW LONDON, MN 56273	82-1911575	501(C)(3)	22,448				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
THE MASTER'S INSTITUTE 4000 LINDEN STREET WHITE BEAR LAKE, MN 551104252	41-1999800	501(C)(3)	12,000				GENERAL SUPPORT
THE REGENERATION CENTER PO BOX 1196 ALEXANDRIA, MN 56308	41-1425984	501(C)(3)	6,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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THE VILLAGE FAMILY SERVICE CENTER 1201 25TH STREET SOUTH FARGO, ND 58106	45-0226423	501(C)(3)	15,000				GENERAL SUPPORT
THEATRE L'HOMME DIEU PO BOX 1086 ALEXANDRIA, MN 56308	41-0858863	501(C)(3)	40,500				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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TOO MUCH TALENT 6 CLOVER COURT SAINT CLOUD, MN 56301	82-1717836	501(C)(3)	5,000				GENERAL SUPPORT
TRI-COUNTY HUMANE SOCIETY 735 8TH STREET NE SAINT CLOUD, MN 56302	23-7449686	501(C)(3)	43,807				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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TRINITY CHURCH 4720 CLASSICAL WAY BOZEMAN, MT 59718	81-0470136	501(C)(3)	42,000				GENERAL SUPPORT
TRINITY INTERNATIONAL UNIVERSITY 2065 HALF DAY ROAD DEERFIELD, IL 60015	36-2216176	501(C)(3)	230,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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TRINITY LUTHERAN CHURCH 54384 HIGHWAY 12 EAST GROVE CITY, MN 56243	41-1707569	501(C)(3)	30,000				GENERAL SUPPORT
TRIOPIA PUBLIC SCHOOLS FOUNDATION PO BOX 31 ARENZVILLE, IL 62611	27-3789567	501(C)(3)	12,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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TRUE FRIENDS 10509 108TH STREET NW ANNANDALE, MN 55302	41-1543013	501(C)(3)	76,750				GENERAL SUPPORT
TWIN CITIES PUBLIC TELEVISION INC PO BOX 64861 SAINT PAUL, MN 551640861	41-0769851	501(C)(3)	7,076				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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UNITED COMMUNITY ACTION PARTNERSHIP INC 200 SW 4TH STREET WILLMAR, MN 56201	41-0904860	501(C)(3)	21,500				GENERAL SUPPORT
UNITED STATES CATHOLIC CONFERENCE 2830 E 4TH STREET DULUTH, MN 55812	26-0069374	501(C)(3)	10,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF BEMIDJI AREA PO BOX 27 BEMIDJI, MN 566190027	41-1567744	501(C)(3)	10,000				GENERAL SUPPORT
UNITED WAY OF CENTRAL MINNESOTA 921 1ST STREET NORTH SUITE 200 SAINT CLOUD, MN 56303	41-0915124	501(C)(3)	242,172				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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UNITED WAY OF CROW WING AND SOUTHERN CASS COUNTIES PO BOX 381 BRainerd, MN 56401	41-0950452	501(C)(3)	35,000				GENERAL SUPPORT
UNITED WAY OF DOUGLAS & POPE COUNTIES 503 HAWTHORNE STREET SUITE 131 ALEXANDRIA, MN 56308	23-7450908	501(C)(3)	16,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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UNITED WAY OF WEST CENTRAL MINNESOTA 311 4TH STREET SW WILLMAR, MN 56201	41-0844871	501(C)(3)	32,700				GENERAL SUPPORT
UNITY OF DAYTON CHURCH 6741 CHAMBERSBURG RD HUBER HEIGHTS, OH 45424	31-0650921	501(C)(3)	12,030				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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UNIVERSITY OF MINNESOTA FOUNDATION 200 OAK STREET SE 500 MINNEAPOLIS, MN 554552010	41-6042488	501(C)(3)	27,481				GENERAL SUPPORT
URBAN IMPACT MINISTRIES PO BOX 50223 NEW ORLEANS, LA 70150	72-1181908	501(C)(3)	6,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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VFW NATIONAL HOME FOR CHILDREN 3573 S WAVERLY ROAD EATON RAPIDS, MI 48827	38-1359597	501(C)(3)	7,893				GENERAL SUPPORT
VINJE LUTHERAN 1101 WILLMAR AVE SW WILLMAR, MN 56201	41-0705876	501(C)(3)	6,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
VOICE OF THE MARTYRS INC PO BOX 443 BARTLESVILLE, OK 740050443	73-1395057	501(C)(3)	12,000				GENERAL SUPPORT
WACOSA PO BOX 757 WAITE PARK, MN 56387	41-0871466	501(C)(3)	23,850				GENERAL SUPPORT

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WAITE PARK SOMALI COMMUNITY ASSOCIATION 2719 WEST DIVISION STREET STE 2 SAINT CLOUD, MN 56301	47-3374696	501(C)(3)	18,800				GENERAL SUPPORT
WALKER AREA COMMUNITY CENTER PO BOX 327 WALKER, MN 56484	41-2007348	501(C)(3)	8,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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WARREN ALVARADO OSLO PUBLIC SCHOOL EDUCATION FOUNDATION PO BOX 125 WARREN, MN 56762	41-1728608	501(C)(3)	18,800				GENERAL SUPPORT
WELLNESS IN THE WOODS INC 738 3RD AVENUE NW EAGLE BEND, MN 56446	46-2785877	501(C)(3)	15,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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WEST CENTRAL INDUSTRIES INC 1300 SW 22ND STREET WILLMAR, MN 56201	41-0872939	501(C)(3)	10,000				GENERAL SUPPORT
WEST CENTRAL MINNESOTA COMMUNITIES ACTION INC 411 INDUSTRIAL PARK BLVD ELBOW LAKE, MN 56531	41-0904808	501(C)(3)	73,600				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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WILLMAR PUBLIC SCHOOL DISTRICT 347 611 5TH STREET SW WILLMAR, MN 56201	41-6001746		35,386				GENERAL SUPPORT
WOODLAND CENTERS 1125 SE 6TH STREET WILLMAR, MN 56201	41-0810019	501(C)(3)	11,307				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
WORD OF LIFE PO BOX 600 SCHROON LAKE, NY 12870	13-5648615	501(C)(3)	10,000				GENERAL SUPPORT
WYCLIFFE BIBLE TRANSLATORS PO BOX 628200 ORLANDO, FL 328628200	95-1831097	501(C)(3)	9,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
YES NETWORK PO BOX 1042 SAINT CLOUD, MN 56302	32-0419607	501(C)(3)	58,000				GENERAL SUPPORT
YOUTH INVESTMENT FOUNDATION 1364 HAMEL ROAD MEDINA, MN 55340	23-7058853	501(C)(3)	25,000				GENERAL SUPPORT

Schedule J
(Form 990)

Compensation Information

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

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
COMMUNITYGIVING

Employer identification number
36-3412544

Part I Questions Regarding Compensation

	Yes	No								
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax idemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax idemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax idemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
<p>b If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>	1b									
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?</p>	2									
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <table border="0"> <tr> <td><input type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input type="checkbox"/> Independent compensation consultant</td> <td><input type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study	<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study									
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<p>4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:</p> <p>a Receive a severance payment or change-of-control payment?</p> <p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>	4a	No								
	4b	No								
	4c	No								
<p>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p> <p>5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III.</p>	5a	Yes								
	5b	No								
<p>6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III.</p>	6a	Yes								
	6b	No								
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.</p>	7	No								
<p>8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.</p>	8	No								
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9									

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 5	PRESIDENT RECEIVES A BONUS BASED ON BENCHMARKS CREATED BY THE BOARD OF DIRECTORS.
PART I, LINE 6	PRESIDENT RECEIVES A BONUS BASED ON BENCHMARKS CREATED BY THE BOARD OF DIRECTORS.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2019

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
 ▶ **Attach to Form 990.**
 ▶ **Go to www.irs.gov/Form990 for the latest information.**

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
COMMUNITYGIVING

Employer identification number
36-3412544

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	55	4,562,726	STOCK MKT HISTORICAL PRI
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

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

29	
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30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

	Yes	No
30a		No
31	Yes	
32a	Yes	

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

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

b If "Yes," describe in Part II.

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

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 32B:	ALL CONTRIBUTIONS OF SECURITIES ARE MAINTAINED AND SOLD BY VARIOUS INVESTMENT COMPANIES.

SCHEDULE O
(Form 990 or 990-EZ)**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

2019**Open to Public Inspection**

Department of the Treasury

Name of the organization
COMMUNITYGIVING

Employer identification number

36-3412544

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE 990 IS PREPARED BY THE ORGANIZATION'S PUBLIC ACCOUNTANT WITH THE ASSISTANCE OF THE ORGANIZATION'S PERSONNEL. UPON COMPLETION OF THE 990, IT IS PROVIDED TO THE ORGANIZATION'S BOARD AT THE NEXT AVAILABLE MEETING, OR TO EACH MEMBER THROUGH E-MAIL IF THE NEXT AVAILABLE MEETING IS AFTER THE DUE DATE OF THE 990, IN ORDER TO REVIEW AND SIGN PRIOR TO MAILING.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE STAFF OF THE ORGANIZATION REVIEW ALL RETURNED, SIGNED CONFLICT OF INTEREST POLICY STATEMENTS PREPARED BY THE VOLUNTEERS AND KEY EMPLOYEES FOR CONFLICTS IDENTIFIED WITHIN THE STATEMENT. SHOULD A TRANSACTION WITH THE VOLUNTEER OR KEY EMPLOYEE IDENTIFIED WITHIN THE STATEMENT BE RECOMMENDED, THE POTENTIAL TRANSACTION IS BROUGHT TO THE BOARD OF DIRECTORS FOR APPROVAL AND THE RELATED VOLUNTEER OR KEY EMPLOYEE IS REMOVED FROM THE DISCUSSION AND/OR VOTE.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	<p>THE PROCESS FOR THE ANNUAL REVIEW OF THE PRESIDENT IS THE RESPONSIBILITY OF THE GOVERNANCE COMMITTEE OF THE ORGANIZATION. EACH SPRING THE GOVERNANCE COMMITTEE SHALL CREATE A WRITTEN SURVEY INSTRUMENT FOR ALL BOARD MEMBERS OF THE ORGANIZATION TO COMPLETE. THE SURVEY INSTRUMENT WILL CONTAIN QUESTIONS THAT DIRECTLY RELATE TO THE JOB DESCRIPTION OF THE PRESIDENT. THE SURVEY ALONG WITH THE PRESIDENT'S WRITTEN SELF-ASSESSMENT AND THE PRESIDENT'S ASSESSMENT OF ANNUAL GOAL ATTAINMENT WILL BE SENT TO ALL MEMBERS OF THE ORGANIZATION'S BOARD OF DIRECTORS. THE SURVEY RESULTS WILL BE COMPILED BY THE BOARD CHAIR AND GOVERNANCE CHAIR OF THE ORGANIZATION. THE GOVERNANCE COMMITTEE WILL REVIEW THE RESULTS OF THE SURVEY AND PREPARE A RECOMMENDATION TO THE BOARD OF DIRECTORS. THE GOVERNANCE COMMITTEE WILL ALSO REVIEW THE CURRENT SALARY LEVEL OF THE PRESIDENT AND COMPARE THE SURVEY TO SIMILAR POSITIONS AND SIMILAR ORGANIZATIONS. BASED ON THE COMPARATIVE SURVEY REVIEW AND THE RESULTS OF THE ANNUAL SURVEY AND THE PRESIDENT'S ATTAINMENT OF ANNUAL GOALS, THE GOVERNANCE COMMITTEE WILL FORMULATE A RECOMMENDATION FOR ANY COMPENSATION ADJUSTMENT FOR THE PRESIDENT. THE CHAIR OF THE GOVERNANCE COMMITTEE WILL REPORT THE RESULTS OF THE SURVEY AND THE RECOMMENDATIONS TO THE BOARD OF THE ORGANIZATION. THE BOARD WILL ACT ON THE RECOMMENDATIONS OF THE GOVERNANCE COMMITTEE. THE CHAIR OF THE GOVERNANCE COMMITTEE WILL SHARE THE RESULTS WITH THE PRESIDENT.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9:	CHANGE IN VALUE OF TRUSTS 295,612. CHANGE IN VALUE OF LIFE INSURANCE -149,309. FASB 958-605 ADJUSTMENT 3,108,687.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XII, LINE 2C:	NO CHANGE FROM PRIOR YEAR

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2019

Open to Public Inspection

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
 ▶ **Attach to Form 990.**
 ▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization
COMMUNITYGIVING

Employer identification number

36-3412544

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) CMCF PROPERTIES 101 7TH AVENUE S STE 100 ST CLOUD, MN 56301	INVESTING ACTIVITIES	MN	14,000	993,935	COMMUNITYGIVING
(2) REAL ESTATE GIVING LLC 101 7TH AVENUE S STE 100 ST CLOUD, MN 56301	BUILD COMMUNITY BY FACILITATING THE GIFTING OF REAL ESTATE	MN	5,150	436,289	COMMUNITYGIVING

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) MINNESOTA REAL ESTATE FOUNDATION 101 7TH AVENUE S SUITE 100 ST CLOUD, MN 56301 02-0702439	BUILD COMMUNITY BY SIMPLIFYING & FACILITATING THE GIFTING OF REAL ESTATE	MN	501(C)(3)	SCH A LINE 12 TYPE I	N/A		No
(2) GRANITE CHARITABLE 101 7TH AVENUE S SUITE 210 ST CLOUD, MN 56301 84-2810742	PROVIDE SUPPORT TO NONPROFIT ORGANIZATIONS	MN	501(C)(3)	SCH A LINE 12 TYPE I	N/A		No

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.

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

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

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

	Yes	No
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?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		No
b Gift, grant, or capital contribution to related organization(s)		No
c Gift, grant, or capital contribution from related organization(s)		No
d Loans or loan guarantees to or for related organization(s)		No
e Loans or loan guarantees by related organization(s)	Yes	
f Dividends from related organization(s)		No
g Sale of assets to related organization(s)		No
h Purchase of assets from related organization(s)		No
i Exchange of assets with related organization(s)		No
j Lease of facilities, equipment, or other assets to related organization(s)		No
k Lease of facilities, equipment, or other assets from related organization(s)		No
l Performance of services or membership or fundraising solicitations for related organization(s)	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	Yes	
o Sharing of paid employees with related organization(s)		No
p Reimbursement paid to related organization(s) for expenses		No
q Reimbursement paid by related organization(s) for expenses	Yes	
r Other transfer of cash or property to related organization(s)		No
s Other transfer of cash or property from related organization(s)		No

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.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) MINNESOTA REAL ESTATE FOUNDATION	E	77,904	YEAR-END LOAN BALANCE

Part VII **Supplemental Information**

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

Return Reference	Explanation