

Return of Organization Exempt From Income Tax

2010

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2010 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization COMMUNITY FOUNDATION OF GREATER FORT WAYNE INC.		D Employer identification number 35-1119450
	Doing Business As		E Telephone number 260-426-4083
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 32,263,755.
	555 E. WAYNE STREET		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
City or town, state or country, and ZIP + 4 FORT WAYNE, IN 46802		H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	If "No," attach a list. (see instructions)
F Name and address of principal officer: DAVID J. BENNETT 555 E WAYNE STREET, FORT WAYNE, IN 46802		H(c) Group exemption number ▶	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ▶ WWW.CFGFW.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1956 M State of legal domicile: IN	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO SERVE AS A COMMUNITY LEADER TO IMPROVE THE QUALITY OF LIFE BY BUILDING PERMANENT ENDOWMENTS,		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	15
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	15
	5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	12
	6 Total number of volunteers (estimate if necessary)	6	60
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	3,113,193.	2,607,318.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	202,155.	774,796.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,436,896.	-633,673.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	5,752,244.	2,748,441.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	3,648,102.	3,738,958.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	593,424.	614,763.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 154,488.	0.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	392,456.	386,800.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,633,982.	4,740,521.	
19 Revenue less expenses. Subtract line 18 from line 12	1,118,262.	-1,992,080.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	83,116,657.	89,641,522.
	22 Net assets or fund balances. Subtract line 21 from line 20	6,205,204.	5,931,583.
		76,911,453.	83,709,939.

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
	DAVID J. BENNETT, EXECUTIVE DIRECTOR		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	TODD E. HAINES		
Paid Preparer Use Only	Firm's name ▶ HAINES, ISENBARGER & SKIBA, LLC	Firm's EIN ▶	Check <input type="checkbox"/> if self-employed
	Firm's address ▶ 4630-8 W. JEFFERSON BLVD. FORT WAYNE, IN 46804	Phone no. (260) 436-9500	PTIN

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

1 Briefly describe the organization's mission:
TO SERVE AS A COMMUNITY LEADER TO IMPROVE THE QUALITY OF LIFE BY
BUILDING PERMANENT ENDOWMENTS, PROMOTING EFFECTIVE GRANTMAKING,
FOSTERING PHILANTHROPY, STIMULATING COMMUNITY DIALOGUE, AND HELPING
DONORS ACHIEVE THEIR CHARITABLE GOALS.

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 exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 3,943,582. including grants of \$ 3,738,958.) (Revenue \$ _____)
GRANTS AND SCHOLARSHIPS TO VARIOUS CHARITABLE ORGANIZATIONS.

4b (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4c (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

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

4e Total program service expenses **▶** 3,943,582.

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)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
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? <i>If "Yes," complete Schedule C, Part III</i>		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
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.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		

**COMMUNITY FOUNDATION OF GREATER FORT
WAYNE INC.**

Form 990 (2010)

35-1119450 Page 4

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?		X
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Form 990 (2010)

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
	1a 4		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	1b 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
	1c		
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 12		
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)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," 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)?		X
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
	4a		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
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?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
	6b		
7	Organizations that may receive deductible contributions under section 170(c).		
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?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
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?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
	7g		
	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?		X
	9a		
	9b		
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?	12a	
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	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

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

Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		15
b	Enter the number of voting members included in line 1a, above, who are independent		15
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	X	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Does the organization have members or stockholders?		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13	Does the organization have a written whistleblower policy?	X	
14	Does the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **IN**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **DAVID BENNETT - 260-426-4083**
555 E. WAYNE STREET, FORT WAYNE, IN 46802

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

Check if Schedule O contains a response to any question in this Part VII

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(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			
TRACY L. SHELLABARGER PRESIDENT	1.00	X		X				0.	0.	0.
KATHY CALLEN VICE PRESIDENT	1.00	X		X				0.	0.	0.
TODD STEPHENSON TREASURER	1.00	X		X				0.	0.	0.
HOWARD CHAPMAN SECRETARY	1.00	X		X				0.	0.	0.
DARRELL BLANTON TREASURER	1.00	X		X				0.	0.	0.
ANDREW BROOKS DIRECTOR	1.00	X						0.	0.	0.
CAROL A. DURHAM DIRECTOR	1.00	X						0.	0.	0.
GREGORY A. JOHNSON DIRECTOR	1.00	X						0.	0.	0.
THOMAS M. KIMBROUGH DIRECTOR	1.00	X						0.	0.	0.
ANNETTE TEDERS DIRECTOR	1.00	X						0.	0.	0.
MARCIA TAPP-SANDERS DIRECTOR	1.00	X						0.	0.	0.
RISE TAYLOR DIRECTOR	1.00	X						0.	0.	0.
W. PAUL WOLF DIRECTOR	1.00	X						0.	0.	0.
JAMES M. VANN DIRECTOR	1.00	X						0.	0.	0.
JANE GERARDOT SECRETARY	1.00	X		X				0.	0.	0.
CAROL LINDQUIST DIRECTOR	1.00	X						0.	0.	0.
IAN BOYCE DIRECTOR	1.00	X						0.	0.	0.

COMMUNITY FOUNDATION OF GREATER FORT
WAYNE INC.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(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			
DAVID BENNETT EXECUTIVE DIRECTOR	40.00			X				126,282.	0.	17,563.
HEIDI LUDWIG ASSOCIATE DIRECTOR	32.00			X				66,575.	0.	2,000.
1b Sub-total								192,857.	0.	19,563.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								192,857.	0.	19,563.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **1**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. **NONE**

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **0**

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514		
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	2,607,318.				
	g	Noncash contributions included in lines 1a-1f: \$		442,961.				
	h	Total. Add lines 1a-1f		2,607,318.				
	Program Service Revenue	2 a		Business Code				
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)		2,660,131.			2660131.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6 a	Gross Rents	(i) Real	(ii) Personal				
		Less: rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)						
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		Less: cost or other basis and sales expenses						
		Gain or (loss)						
		Net gain or (loss)			-1885335.			-1885335.
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
		Less: direct expenses	b					
		Net income or (loss) from fundraising events						
	9 a	Gross income from gaming activities. See Part IV, line 19	a					
Less: direct expenses		b						
Net income or (loss) from gaming activities								
10 a	Gross sales of inventory, less returns and allowances	a						
	Less: cost of goods sold	b						
	Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code					
11 a	ADMINISTRATIVE FEE			90,811.	90,811.			
b	MISCELLANEOUS INCOME			14,258.	14,258.			
c	CHANGE IN VALUE OF SPL			-738,742.	-738,742.			
d	All other revenue							
e	Total. Add lines 11a-11d			-633,673.				
12	Total revenue. See instructions.			2,748,441.	-633,673.	0.	774,796.	

COMMUNITY FOUNDATION OF GREATER FORT

WAYNE INC.

Form 990 (2010)

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) but are not required to complete columns (B), (C), and (D).

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 governments and organizations in the U.S. See Part IV, line 21	3,475,923.	3,475,923.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	263,035.	263,035.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	202,857.	48,093.	137,262.	17,502.
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	319,682.	84,144.	163,734.	71,804.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	7,391.	1,868.	3,947.	1,576.
9 Other employee benefits	42,137.	9,448.	24,404.	8,285.
10 Payroll taxes	42,696.	10,949.	24,349.	7,398.
11 Fees for services (non-employees):				
a Management				
b Legal	335.	84.	193.	58.
c Accounting	25,725.	6,465.	14,801.	4,459.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	174,010.		174,010.	
g Other				
12 Advertising and promotion	13,352.			13,352.
13 Office expenses	3,927.	987.	2,259.	681.
14 Information technology	29,444.	7,400.	16,940.	5,104.
15 Royalties				
16 Occupancy	59,268.	14,895.	34,099.	10,274.
17 Travel	17,068.	4,289.	9,820.	2,959.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	25,748.	6,471.	14,814.	4,463.
23 Insurance	13,277.	3,337.	7,639.	2,301.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a TELEPHONE	7,862.	1,976.	4,523.	1,363.
b MISCELLANEOUS	6,024.	1,514.	3,466.	1,044.
c POSTAGE	5,734.	1,441.	3,299.	994.
d DUES AND SUBSCRIPTIONS	5,026.	1,263.	2,892.	871.
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	4,740,521.	3,943,582.	642,451.	154,488.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

COMMUNITY FOUNDATION OF GREATER FORT
WAYNE INC.

Form 990 (2010)

35-1119450 Page 11

Part X Balance Sheet

		(A) Beginning of year		(B) End of year	
Assets	1 Cash - non-interest-bearing	89,473.	1	423,836.	
	2 Savings and temporary cash investments	3,642,545.	2	3,658,035.	
	3 Pledges and grants receivable, net	51,000.	3	23,000.	
	4 Accounts receivable, net		4		
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6		
	7 Notes and loans receivable, net		7		
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges		9		
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 123,628.			
	b Less: accumulated depreciation	10b 64,467.	78,715.	10c	59,161.
	11 Investments - publicly traded securities	70,865,477.	11	78,839,711.	
	12 Investments - other securities. See Part IV, line 11		12		
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11	8,389,447.	15	6,637,779.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	83,116,657.	16	89,641,522.		
Liabilities	17 Accounts payable and accrued expenses	27,658.	17	26,404.	
	18 Grants payable	1,519,721.	18	744,257.	
	19 Deferred revenue		19		
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22		
	23 Secured mortgages and notes payable to unrelated third parties		23		
	24 Unsecured notes and loans payable to unrelated third parties		24		
	25 Other liabilities. Complete Part X of Schedule D	4,657,825.	25	5,160,922.	
	26 Total liabilities. Add lines 17 through 25	6,205,204.	26	5,931,583.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	72,469,822.	27	80,167,355.	
	28 Temporarily restricted net assets		28		
	29 Permanently restricted net assets	4,441,631.	29	3,542,584.	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building, or equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
	33 Total net assets or fund balances	76,911,453.	33	83,709,939.	
34 Total liabilities and net assets/fund balances	83,116,657.	34	89,641,522.		

Form 990 (2010)

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,748,441.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,740,521.
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,992,080.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	76,911,453.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	8,790,566.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	83,709,939.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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?		X
2b	Were the organization's financial statements audited by an independent accountant?	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	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.		

Form 990 (2010)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	13381565.	2770394.	1764531.	3113193.	2607318.	23637001.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	13381565.	2770394.	1764531.	3113193.	2607318.	23637001.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						10047806.
6 Public support. Subtract line 5 from line 4.						13589195.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	13381565.	2770394.	1764531.	3113193.	2607318.	23637001.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2901200.	3235140.	2701843.	2308750.	2660131.	13807064.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						37444065.
12 Gross receipts from related activities, etc. (see instructions)					12	521,205.
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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	36.29	%
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	38.45	%
16a 33 1/3% support test - 2010. 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	<input checked="" type="checkbox"/>		
b 33 1/3% support test - 2009. 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	<input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2010. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2009. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
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	<input type="checkbox"/>		

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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 IV.)						
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 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2010. 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 - 2009. 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

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization **COMMUNITY FOUNDATION OF GREATER FORT WAYNE INC.**

Employer identification number
35-1119450

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	80	17
2 Aggregate contributions to (during year)	1,331,395.	132,176.
3 Aggregate grants from (during year)	921,765.	128,951.
4 Aggregate value at end of year	11,735,578.	3,396,459.

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" to 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 Tax 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 8/17/06, 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, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, 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 XIV, 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" to 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 XIV, 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) Revenues included in 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 Revenues included in 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 XIV.
- 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" to 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 XIV and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

- 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

- b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered "Yes" to 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	518,589.	417,623.	595,143.		
b Contributions	193.	586.	1,604.		
c Net investment earnings, gains, and losses	66,912.	105,356.	-164,930.		
d Grants or scholarships	0.		8,406.		
e Other expenditures for facilities and programs	55,375.				
f Administrative expenses	4,993.	4,976.	5,788.		
g End of year balance	525,326.	518,589.	417,623.		

- 2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment _____ %
- b Permanent endowment 100.00 %
- c Term endowment _____ %

- 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		X
(ii) related organizations		X
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?		

- 4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		123,628.	64,467.	59,161.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				59,161.

Part VII Investments - Other Securities. 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		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) CASH VALUE OF LIFE INSURANCE POLICY	1,203,161.
(2) BENEFICIAL INTEREST IN TRUSTS	5,296,051.
(3) ACCRUED INVESTMENT INCOME	7,813.
(4) LIMITED PARTNERSHIP INTEREST	130,754.
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	6,637,779.

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) ANNUITIES PAYABLE	207,975.
(3) ASSETS HELD FOR OTHER AGENCIES	4,952,947.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	5,160,922.

FIN 48 (ASC 740) Footnote. In Part XIV, 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).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	2,748,441.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	4,740,521.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-1,992,080.
4	Net unrealized gains (losses) on investments	4	8,747,155.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	43,411.
9	Total adjustments (net). Add lines 4 through 8	9	8,790,566.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	6,798,486.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	11,299,567.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	8,747,154.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	8,747,154.
3	Subtract line 2e from line 1	3	2,552,413.
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 XIV.)	4b	196,028.
c	Add lines 4a and 4b	4c	196,028.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	2,748,441.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	4,501,081.
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 XIV.)	2d	-239,440.
e	Add lines 2a through 2d	2e	-239,440.
3	Subtract line 2e from line 1	3	4,740,521.
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 XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	4,740,521.

Part XIV Supplemental Information

Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

NET CONTRIBUTIONS FROM AGENCY ENDOWMENTS 43,411.

THE INTENDED USE OF THE ORGANIZATION'S ENDOWMENT FUNDS IS TO ENSURE EFFECTIVE GRANTS THAT MEET DONORS CHARITABLE INTERESTS AND ADDRESS THE COMMUNITY'S CHANGING NEEDS FOR TODAY AND THE FUTURE.

PART XII LINE 4B- CONTRIBUTIONS RECEIVED FOR AGENCY ENDOWMENTS \$105,218

Part XIV Supplemental Information (continued)

AND ADMINISTRATIVE FEES OF \$90,811.

PART XIII LINE 2D-ADMINISTRATIVE FEES OF \$90,811 AND GRANTS MADE FROM
AGENCY ENDOWMENTS OF \$148,630.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

**Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.**

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Name of the organization **COMMUNITY FOUNDATION OF GREATER FORT WAYNE INC.** Employer identification number **35-1119450**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 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 Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AIDS TASK FORCE 525 OXFORD ST FORT WAYNE, IN 46806	31-1191147	501(C)(3)	55,915.	0.			TECHNOLOGY AND GENERAL OPERATING SUPPORT
ALLEN COUNTY COURTHOUSE PRESERVATION TRUST INC - 715 S CALHOUN ST RM 300 - FORT WAYNE, IN 46802	35-1932033	501(C)(3)	18,273.	0.			UNRESTRICTED OPERATING SUPPORT; 2010 PAYOUT
AFRICAN IMMIGRANTS SOCIAL AND ECONOMIC DEVELOPMENT AGENCY INC - 3326 S CALHOUN ST - FORT WAYNE, IN 46807	20-0695540	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
ALLEN COUNTY FORT WAYNE HISTORICAL SOCIETY INC - 302 E BERRY ST - FORT WAYNE, IN 46802	35-1043456	501(C)(3)	67,002.	0.			2010 PAYOUT; GENERAL OPERATING SUPPORT; COMPUTER UPGRADES; ALLEN COUNTY EXHIBITION
AFRICAN/AFRICAN-AMERICAN HISTORICAL SOCIETY OF ALLEN COUNTY - 436 E DOUGLAS AVE - FORT WAYNE, IN 46802	35-2063570	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
ALLEN COUNTY PUBLIC LIBRARY FOUNDATION - 900 LIBRARY PLAZA - FORT WAYNE, IN 46802	31-1121023	501(C)(3)	67,411.	0.			UNRESTRICTED OPERATING SUPPORT; PAUL CLARKE NONPROFIT RESOURCE CENTER; ORGANIZATIONAL

2 Enter total number of section 501(c)(3) and government organizations **124.**

3 Enter total number of other organizations **1.**

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

Schedule I (Form 990) (2010)

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

COMMUNITY FOUNDATION OF GREATER FORT

Schedule I (Form 990)

WAYNE INC.

35-1119450

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
AMERICAN RED CROSS OF NORTHEAST INDIANA - PO BOX 5508 - FORT WAYNE, IN 46895	53-0196605	501(C)(3)	27,618.	0.			BRIDGING THE TECHNOLOGY GAP; AID RELIEF FOR HAITI; UNRESTRICTED OPERATING SUPPORT
ARC FOUNDATION OF ALLEN COUNTY INC 4919 COLDWATER RD FORT WAYNE, IN 46825	35-1970967	501(C)(3)	13,740.	0.			UNRESTRICTED OPERATING SUPPORT, 2010 PAYOUT
CYSTIC FIBROSIS FOUNDATION HEADQUARTERS - 6931 ARLINGTON RD - BETHESDA, MA 20814	13-1930701	501(C)(3)	20,000.	0.			CYSTIC FIBROSIS FOUNDATION MAJOR GIFTS MATCHING FUNDS PROGRAM (MILESTONE TO A CURE)
ARTS UNITED OF GREATER FORT WAYNE 303 E MAIN ST FORT WAYNE, IN 46802	35-0992067	501(C)(3)	31,196.	0.			UNRESTRICTED OPERATING SUPPORT; TECHNOLOGY EQUIPMENT; SOFTWARE ENHANCEMENTS; ANNUAL FUND
ASSOCIATED CHURCHES OF FORT WAYNE 602 E WAYNE ST FORT WAYNE, IN 46802	35-0905944	501(C)(3)	40,523.	0.			FOOD BANK NETWORK; 2010 PAYOUT; UNRESTRICTED OPERATING SUPPORT
ALLEN COUNTY COUNCIL ON AGING INC 233 W MAIN ST FORT WAYNE, IN 46802-1613	35-1270976	501(C)(3)	31,414.	0.			2010 PAYOUT; OPERATIONAL AUDIT
BIG BROTHERS BIG SISTERS OF NORTHEAST INDIANA INC - 2439 FAIRFIELD AVE - FORT WAYNE, IN 46807	35-1271943	501(C)(3)	52,000.	0.			UNRESTRICTED OPERATING SUPPORT; LUNCH BUDDIES; MENTOR PROGRAM
BISHOP DWENGER HIGH SCHOOL 1300 E WASHINGTON CENTER RD FORT WAYNE, IN 46825	35-1090327	501(C)(3)	28,000.	0.			ANNUAL FUND; SCHOLARSHIPS
BISHOP LUERS HIGH SCHOOL 333 E. PAULDING RD FORT WAYNE, IN 46816	35-1041555	501(C)(3)	19,967.	0.			SCHOLARSHIPS

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Schedule I (Form 990)

COMMUNITY FOUNDATION OF GREATER FORT

Schedule I (Form 990)

WAYNE INC.

35-1119450

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
BOY SCOUTS OF AMERICA-ANTHONY WAYNE AREA COUNCIL - 8315 W JEFFERSON BLVD - FORT WAYNE, IN 46804-8302	35-0876343	501(C)(3)	36,350.	0.			COMPUTER UPGRADE; 2010 PAYOUT; UNRESTRICTED OPERATING SUPPORT
BOYS & GIRLS CLUB OF FORT WAYNE INC - 2609 FAIRFIELD AVE - FORT WAYNE, IN 46807-1214	35-1778767	501(C)(3)	80,300.	0.			GENERAL OPERATING SUPPORT; PROJECT LEARN; UNRESTRICTED OPERATING SUPPORT
CANCER SERVICES OF ALLEN COUNTY INC, D/B/A CANCER SERVICES OF NE IN - 6316 MUTUAL DR - FORT WAYNE, IN 46825	35-0965609	501(C)(3)	27,620.	0.			UNRESTRICTED OPERATING SUPPORT; GENERAL OPERATING SUPPORT; 2010 PAYOUT
CANTERBURY SCHOOL INC 3210 SMITH ROAD FORT WAYNE, IN 46804	35-1410931	501(C)(3)	5,500.	0.			THE CANTERBURY FUND 2010; UNRESTRICTED OPERATING SUPPORT
BLESSINGS IN A BACKPACK INC 111 E. WAYNE ST. STE 555 FORT WAYNE, IN 46802	26-2627847	501(C)(3)	10,000.	0.			PROVIDE FOOD FOR CHILDREN ON WEEKENDS DURING SCHOOL YEAR
CATHOLIC CHARITIES, FORT WAYNE/SOUTH BEND DIOCESE - 315 E. WASHINGTON BLVD - FORT WAYNE, IN 46802	35-1038653	501(C)(3)	61,000.	0.			UNRESTRICTED OPERATING SUPPORT; ECHO PROGRAM
CEDARS HOPE INC 527 W BERRY ST FORT WAYNE, IN 46802	35-1862531	501(C)(3)	10,000.	0.			PERMANENT SUPPORTIVE HOUSING
AMERICAN HEART ASSOCIATION INC 208 S LASALLE ST, STE 900 CHICAGO, IL 60604	13-5613797	501(C)(3)	5,133.	0.			TO ASSIST THE LOCAL CHAPTER; OPERATING SUPPORT
COMMUNITY HARVEST FOOD BANK OF NORTHEAST INDIANA INC - PO BOX 10967 - FORT WAYNE, IN 46855	31-1100607	501(C)(3)	6,850.	0.			UNRESTRICTED OPERATING SUPPORT; ANNUAL APPEAL

LHA

Schedule I (Form 990)

COMMUNITY FOUNDATION OF GREATER FORT

Schedule I (Form 990)

WAYNE INC.

35-1119450

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
ANDREW'S CENTER 2610 NEW HAVEN AVE FORT WAYNE, IN 46803	13-4230215	501(C)(3)	30,000.	0.			UNRESTRICTED OPERATING SUPPORT
COVENANT UNITED METHODIST CHURCH 10001 COLDWATER RD FORT WAYNE, IN 46825	35-0996143	501(C)(3)	12,500.	0.			2011 OPERATION FUNDS
COUNCIL ON FOUNDATIONS INC 2121 CRYSTAL DR. STE 700 ARLINGTON, VA 22202	13-6068327	501(C)(3)	8,760.	0.			2010 MEMBERSHIP DUES
ARCH INC 818 LAFAYETTE ST FORT WAYNE, IN 46802	35-1367895	501(C)(3)	30,000.	0.			GENERAL OPERATING SUPPORT
DAVE HEFNER INTERNATIONAL EXCHANGE FUND INC - 1410 CHANTERELLE DR - FORT WAYNE, IN 46845	23-7413166	501(C)(3)	53,928.	0.			2010 PAYOUT
ARTLINK INC 437 E BERRY ST FORT WAYNE, IN 46802	35-1461761	501(C)(3)	12,500.	0.			UNRESTRICTED & GENERAL OPERATING SUPPORT
EAST WAYNE STREET CENTER INC 801 E WAYNE ST FORT WAYNE, IN 46803	35-1587206	501(C)(3)	25,250.	0.			PROJECT SOLVE AND ADULT EDUCATION GED PROGRAMS; UNRESTRICTED OPERATING SUPPORT
EMBASSY THEATRE FOUNDATION INC 125 W JEFFERSON BLD FORT WAYNE, IN 46802	23-7355731	501(C)(3)	26,250.	0.			LIGHTING THE MARQUEE; GENERAL OPERATING SUPPORT
ERINS HOUSE FOR GRIEVING CHILDREN INC - 3811 ILLINOIS RD STE 205 - FORT WAYNE, IN 46804-1217	35-1884264	501(C)(3)	33,949.	0.			UNRESTRICTED OPERATING SUPPORT; KIDS CHRISTMAS PROGRAM; AUTOMATED EXTERNAL DEFIBRILLATOR

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Schedule I (Form 990)

COMMUNITY FOUNDATION OF GREATER FORT

Schedule I (Form 990)

WAYNE INC.

35-1119450

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
EUELL A WILSON CENTER INC 1512 OXFORD ST FORT WAYNE, IN 46806	35-1893381	501(C)(3)	11,000.	0.			GENERAL OPERATING SUPPORT; ARTS PROGRAM
BLUE JACKET INC 3702 S CLINTON ST FORT WAYNE, IN 46806	35-2210669	501(C)(3)	15,000.	0.			TECHNOLOGY UPDATE
FAITH LUTHERAN CHURCH 1700 E PETTIT AVE FORT WAYNE, IN 46806	91-1758010	501(C)(3)	8,000.	0.			2010 GENERAL OFFERING
CALVARY UNITED METHODIST CHURCH 801 SOUTH HUNTINGTON SYRACUSE, IN 46567	31-1813333	501(C)(3)	6,000.	0.			UNRESTRICTED OPERATING SUPPORT
FIRST PRESBYTERIAN CHURCH OF FORT WAYNE - 300 W WAYNE ST - FORT WAYNE, IN 46802	13-5562176	501(C)(3)	16,555.	0.			UNRESTRICTED OPERATING SUPPORT
FIRST WAYNE STREET UNITED METHODIST CHURCH - 300 E. WAYNE STREET - FORT WAYNE, IN 46802-2714	13-5562279	501(C)(3)	7,600.	0.			UNRESTRICTED OPERATING SUPPORT; CHURCH CAMP
FORENSIC NURSING SPECIALTIES INC. D/B/A FW SEXUAL ASSAULT TREATMENT - 2270 LAKE AVE. STE 201 - FORT WAYNE, IN 46805	35-1943648	501(C)(3)	8,400.	0.			TECHNOLOGY SUPPORT
CENTER FOR NONVIOLENCE INC 235 W CREIGHTON AVE FORT WAYNE, IN 46807	31-1045334	501(C)(3)	30,000.	0.			FAMILY NONVIOLENCE EDUCATION
FORT WAYNE CIVIC THEATRE INC 303 E MAIN ST FORT WAYNE, IN 46802	35-6001476	501(C)(3)	33,600.	0.			UNRESTRICTED OPERATING SUPPORT; SETTING THE STAGE

LHA

Schedule I (Form 990)

COMMUNITY FOUNDATION OF GREATER FORT

Schedule I (Form 990)

WAYNE INC.

35-1119450

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
FORT WAYNE CLUBHOUSE INC D/B/A THE CARRIAGE HOUSE - 3327 LAKE AVE - FORT WAYNE, IN 46805	35-2026647	501(C)(3)	40,000.	0.			GENERAL OPERATING SUPPORT
FORT WAYNE JEWISH FEDERATION 227 E WASHINGTON BLVD, STE 303 FORT WAYNE, IN 46802-3198	35-0869051	501(C)(3)	13,295.	0.			2010 PAYOUT, UNRESTRICTED OPERATING SUPPORT
FORT WAYNE MUSEUM OF ART INC 311 E MAIN ST FORT WAYNE, IN 46802	35-0953440	501(C)(3)	14,691.	0.			UNRESTRICTED OPERATING SUPPORT; 2010 PAYOUT; AMERICAN ART INITIATIVES
FORT WAYNE PARKS & RECREATIONS 705 E. STATE BLVD FORT WAYNE, IN 46805	35-6001029	GOVERNMENT ENTIT	105,173.	0.			SALOMON FARM CONSTRUCTION; UNRESTRICTED OPERATING SUPPORT; 2010 PAYOUT
FORT WAYNE PHILHARMONIC ORCHESTRA INC - 4901 FULLER DR - FORT WAYNE, IN 46835	35-0791163	501(C)(3)	45,551.	0.			UNRESTRICTED OPERATING SUPPORT; 2010 PAYOUT; PHIL KIDS PROGRAM; ANNUAL FUND
FORT WAYNE PUBLIC TELEVISION INC. WFWA PBS 39 - 2501 E. COLISEUM BLVD - FORT WAYNE, IN 46805-1562	23-7173906	501(C)(3)	17,225.	0.			UNRESTRICTED OPERATING SUPPORT
FORT WAYNE SISTER CITIES INTERNATIONAL INC - 927 S HARRISON ST - FORT WAYNE, IN 46802	31-1105602	501(C)(3)	15,985.	0.			2010 PAYOUT
FORT WAYNE URBAN LEAGUE INC 2135 S. HANNA ST FORT WAYNE, IN 46803-2429	35-0869052	501(C)(3)	38,350.	0.			UNRESTRICTED OPERATING SUPPORT; EDUCATION AND YOUTH SERVICES
COMMUNITY ACTION OF NORTHEAST INDIANA - PO BOX 10570 - FORT WAYNE, IN 46853-0570	35-1111819	501(C)(3)	24,950.	0.			COVERING KIDS AND FAMILIES OF NE INDIANA; DEEDS OF COMPASSION

LHA

Schedule I (Form 990)

COMMUNITY FOUNDATION OF GREATER FORT

Schedule I (Form 990)

WAYNE INC.

35-1119450

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
FORT WAYNE ZOOLOGICAL SOCIETY, INC. - 3411 SHERMAN BLVD - FORT WAYNE, IN 46808	35-6068234	501(C)(3)	5,474.	0.			UNRESTRICTED OPERATING SUPPORT; 2010 PAYOUT; AFRICAN VELDT
GIRL SCOUTS OF NORTHERN INDIANA-MICHIANA INC - 10008 DUPONT CIRCLE E - FORT WAYNE, IN 46825	35-0868091	501(C)(3)	48,116.	0.			TELEPHONE SYSTEM AND TECHNOLOGY; UNRESTRICTED OPERATING SUPPORT
CONCORDIA LUTHERAN CHURCH AND SCHOOL - 4245 LAKE AVE - FORT WAYNE, IN 46815	43-0658188	501(C)(3)	7,768.	0.			TO PROVIDE SCHOLARSHIPS FOR STUDENTS ATTENDING CONCORDIA LUTHERAN ELEMENTARY SCHOOL
HOMEBOUND MEALS INC 611 W BERRY ST FORT WAYNE, IN 46802	35-1186741	501(C)(3)	8,306.	0.			TECHNOLOGY SUPPORT; UNRESTRICTED OPERATING SUPPORT
HOPE HOUSE INC 1115 GARDEN ST FORT WAYNE, IN 46802	35-1537053	501(C)(3)	20,250.	0.			UNRESTRICTED OPERATING SUPPORT
CROSSROAD CHILD & FAMILY SERVICES INC - 2525 LAKE AVE - FORT WAYNE, IN 46805	35-0869050	501(C)(3)	5,193.	0.			2010 PAYOUT
DIOCESE OF FORT WAYNE-SOUTH BEND 1102 S CLINTON ST FORT WAYNE, IN 46802	35-0876373	501(C)(3)	9,000.	0.			LEGACY OF FAITH; ANNUAL BISHOP'S APPEAL
INDIANA-PURDUE UNIVERSITY FORT WAYNE - 2101 E COLISEUM BLVD - FORT WAYNE, IN 46805-1499	35-6001673	501(C)(3)	50,943.	0.			SCHOLARSHIPS; UNRESTRICTED OPERATING SUPPORT
DOCTORS WITHOUT BORDERS USA INC 333 SEVENTH AVE, 2ND FL NEW YORK, NY 10001-5004	13-3433452	501(C)(3)	10,250.	0.			UNRESTRICTED OPERATING SUPPORT; HAITIAN RELIEF EFFORTS

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Schedule I (Form 990)

COMMUNITY FOUNDATION OF GREATER FORT

Schedule I (Form 990)

WAYNE INC.

35-1119450

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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IVY TECH FOUNDATION INC 3800 N ANTHONY BLVD FORT WAYNE, IN 46805-1489	23-7073977	501(C)(3)	9,126.	0.			UNRESTRICTED OPERATING SUPPORT; SCHOLARSHIPS
KEYSTONE SCHOOL INC. 1800 LAVERNE AVE FORT WAYNE, IN 46805	35-2210931	501(C)(3)	7,066.	0.			UNRESTRICTED OPERATING SUPPORT
LEAGUE FOR THE BLIND AND DISABLED INC - 5821 S. ANTHONY BLVD - FORT WAYNE, IN 46816	35-0876341	501(C)(3)	25,500.	0.			GENERAL OPERATING SUPPORT
DR BILL LEWIS CENTER FOR CHILDREN 2730 E STATE STREET, STE C FORT WAYNE, IN 46805	35-2096006	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
LUTHERAN SOCIAL SERVICES OF INDIANA INC - PO BOX 11329 - FORT WAYNE, IN 46857-1329	35-0868124	501(C)(3)	75,400.	0.			GENERAL OPERATING SUPPORT
MARTIN LUTHER KING MONTESSORI SCHOOL INC - 6001 S. ANTHONY BLVD. - FORT WAYNE, IN 46816	35-1161409	501(C)(3)	35,000.	0.			GENERAL OPERATING SUPPORT
MATTHEW 25 HEALTH AND DENTAL CLINIC - 413 E JEFFERSON BLVD - FORT WAYNE, IN 46802	35-1484951	501(C)(3)	72,065.	0.			UNRESTRICTED OPERATING SUPPORT; 2010 PAYOUT
MIDWEST MEDICAL RESEARCH FOUNDATION INC - 1819 CAREW ST - FORT WAYNE, IN 46805	35-1637515	501(C)(3)	6,000.	0.			STUDENT RESEARCH FELLOWSHIP PROGRAM SPONSORSHIP
FORT WAYNE ALLEN COUNTY ECONOMIC DEVELOPMENT ALLIANCE INC - 111 W WAYNE ST - FORT WAYNE, IN 46802	35-1787258	501(C)(3)	25,000.	0.			PRE-DEVELOPMENT AGREEMENT FOR DOWNTOWN DEVELOPMENT

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Schedule I (Form 990)

COMMUNITY FOUNDATION OF GREATER FORT

Schedule I (Form 990)

WAYNE INC.

35-1119450

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
NATIONAL LEAGUE OF CUBAN AMERICAN COMMUNITY BASED CENTERS - 3000 S WAYNE AVE - FORT WAYNE, IN 46807	31-0974403	501(C)(3)	25,000.	0.			PROGRAM SUPPORT FOR CLASSES AND SERVICES
FORT WAYNE ASTRONOMICAL SOCIETY INC - 9609 COLSONS HILL - FORT WAYNE, IN 46825	35-6042260	501(C)(3)	10,000.	0.			STAR*QUEST, A NEW UPDATED AND RELOCATED OBSERVATORY AT FOX ISLAND COUNTY PARK
FORT WAYNE CHILDREN'S CHOIR INC 2101 E COLISEUM BLVD FORT WAYNE, IN 46805	35-1638989	501(C)(3)	10,965.	0.			2010 PAYOUT; OUTREACH PROGRAM
FORT WAYNE DANCE COLLECTIVE INC 437 E BERRY ST FORT WAYNE, IN 46802	31-0958473	501(C)(3)	40,000.	0.			GENERAL OPERATING SUPPORT
POWER HOUSE YOUTH CENTER INC 830 MAIN ST NEW HAVEN, IN 46774	35-2022371	501(C)(3)	25,665.	0.			GLO YOUTH PROGRAM; BARCODE STUDENT ID CARD & TRACKING SYSTEM
FORT WAYNE MEDICAL SOCIETY FOUNDATION INC - 709 CLAY ST, STE 300 - FORT WAYNE, IN 46802	35-6049685	501(C)(3)	18,651.	0.			TECHNOLOGY SUPPORT FOR HEALTHIER MOMS & BABIES; 2010 PAYOUT
QUESTA FOUNDATION FOR EDUCATION INC - 3468 STELLHORN ROAD - FORT WAYNE, IN 46815	35-6025795	501(C)(3)	17,837.	0.			2010 PAYOUT; TECHNOLOGY IMPROVEMENT INITIATIVE
RSVP OF ALLEN COUNTY INC 3401 LAKE AVE., STE 4 FORT WAYNE, IN 46805	36-4559850	501(C)(3)	21,704.	0.			TECHNOLOGY SUPPORT
SCAN INC 500 W MAIN ST FORT WAYNE, IN 46802	31-0899309	501(C)(3)	23,500.	0.			UNRESTRICTED OPERATING SUPPORT; FAMILY RESTORATION PROGRAM

LHA

Schedule I (Form 990)

COMMUNITY FOUNDATION OF GREATER FORT

Schedule I (Form 990)

WAYNE INC.

35-1119450

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
SOUTH SIDE HIGH SCHOOL FOUNDATION 3207 COVINGTON LAKE DR. FORT WAYNE, IN 46804	35-1924095	501(C)(3)	7,200.	0.			2010 PAYOUT; FAMILY & CONSUMER SCIENCE DEPT.
ST. CHARLES BORROMEIO CATHOLIC CHURCH - 4916 TRIER RD - FORT WAYNE, IN 46815	53-0196617	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
SALVATION ARMY 2901 N. CLINTON ST FORT WAYNE, IN 46805-1909	13-3485289	501(C)(3)	30,046.	0.			UNRESTRICTED OPERATING SUPPORT; SOCIAL SERVICE PROGRAM; HAITIAN RELIEF; ANGEL TREE
SCIENCE CENTRAL INC 1950 N. CLINTON ST FORT WAYNE, IN 46805	31-1032583	501(C)(3)	33,163.	0.			UNRESTRICTED OPERATING SUPPORT; 2010 PAYOUT
ST JOSEPH-ST.ELIZABETH ANN SETON CATHOLIC SCHOOL - 2211 BROOKLYN AVE - FORT WAYNE, IN 46802	35-2051396	501(C)(3)	12,500.	0.			2010 SCHOLARSHIPS FOR STUDENTS
ST JUDE CATHOLIC CHURCH 2130 PEMBERTON DR FORT WAYNE, IN 46805	53-0196617	501(C)(3)	17,700.	0.			ANNUAL BISHOP'S APPEAL; ADOPT A STUDENT
ST JUDE ELEMENTARY 2110 PEMBERTON DR FORT WAYNE, IN 46805	35-0876373	501(C)(3)	12,500.	0.			2010 SCHOLARSHIPS FOR STUDENTS
FORT WAYNE RESCUE MISSION MINISTRIES INC - PO BOX 11116 - FORT WAYNE, IN 46855-1116	35-1054670	501(C)(3)	22,204.	0.			UNRESTRICTED OPERATING SUPPORT; TECHNOLOGY
FOUNDATION FOR ART AND MUSIC IN ELEMENTARY EDUCATION INC - 2101 E COLISEUM BLVD - FORT WAYNE, IN 46805-1499	35-1719238	501(C)(3)	31,500.	0.			TEACHER WORKSHOP; MULTICULTURAL ARTS PROGRAM; GENERAL OPERATING SUPPORT

LHA

Schedule I (Form 990)

COMMUNITY FOUNDATION OF GREATER FORT

Schedule I (Form 990)

WAYNE INC.

35-1119450

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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SOUTHEAST YOUTH COUNCIL INC. D/B/A CORNERSTONE YOUTH CENTER - 123 MEYER DR. - MONROEVILLE, IN 46773	35-2131053	501(C)(3)	10,000.	0.			CORNERSTONE YOUTH CENTER
THREE RIVERS JUNCTION INC 10424 INDIAN RIDGE DR FORT WAYNE, IN 46814	35-2130681	501(C)(3)	11,865.	0.			2010 PAYOUT
TRINITY ENGLISH EVANGELICAL LUTHERAN CHURCH - 405 W WAYNE ST - FORT WAYNE, IN 46802	35-0876356	501(C)(3)	21,927.	0.			UNRESTRICTED OPERATING SUPPORT; SEED OF FAITH CAMPAIGN
TURNSTONE CENTER FOR CHILDREN AND ADULTS WITH DISABILITIES INC. - 3320 N. CLINTON ST - FORT WAYNE, IN 46805	35-0913541	501(C)(3)	53,186.	0.			2010 PAYOUT; UNRESTRICTED OPERATING SUPPORT; INTERNET BASED TRAINING PROJECT; TUITION FOR
FRANCISCAN CENTER INC PO BOX 10303 FORT WAYNE, IN 46851-0303	35-1838772	501(C)(3)	30,000.	0.			GENERAL OPERATING SUPPORT
UNITED WAY OF ALLEN COUNTY PO BOX 11784 FORT WAYNE, IN 46860-1784	35-0867932	501(C)(3)	30,196.	0.			UNRESTRICTED OPERATING SUPPORT
UNITY PERFORMING ARTS FOUNDATION INC. - PO BOX 10394 - FORT WAYNE, IN 46852-0394	35-2110907	501(C)(3)	10,000.	0.			UNITY PERFORMING ARTS FOUNDATION
UNIVERSITY OF SAINT FRANCIS 2701 SPRING ST FORT WAYNE, IN 46808	35-0886846	501(C)(3)	66,146.	0.			SCHOOL OF CREATIVE ARTS; BASS MANSION RENOVATIONS; SCHOLARSHIPS; FOOTBALL PROGRAM
VINCENT VILLAGE INC 2827 HOLTON AVE FORT WAYNE, IN 46806	35-1780135	501(C)(3)	54,921.	0.			2010 PAYOUT; UNRESTRICTED OPERATING SUPPORT

LHA

Schedule I (Form 990)

COMMUNITY FOUNDATION OF GREATER FORT

Schedule I (Form 990)

WAYNE INC.

35-1119450

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
VOLUNTEER LAWYER PROGRAM OF NORTHEAST INDIANA, INC. - 927 S. HARRISON ST - FORT WAYNE, IN 46802	01-0718469	501(C)(3)	10,000.	0.			VOLUNTEER LAWYER PROGRAM OF NORTHEAST INDIANA INC
WELLSPRING INTERFAITH SOCIAL SERVICES, INC - 1316 BROADWAY AVE - FORT WAYNE, IN 46802-3304	51-0151621	501(C)(3)	75,540.	0.			GENERAL OPERATING SUPPORT; CAMP SCHOLARSHIPS
YMCA OF GREATER FORT WAYNE 347 W BERRY ST, STE 500 FORT WAYNE, IN 46802	35-0886850	501(C)(3)	86,782.	0.			2010 PAYOUT; PARTNER WITH YOUTH; RIVER CITY RAT RACE; STRONG KIDS; OLD FORT/RENAISSANCE POINTE
YOUNG LIFE 420 N. CASCADE AVE COLORADO SPRINGS, CO 80903	84-0385934	501(C)(3)	8,000.	0.			UNRESTRICTED OPERATING SUPPORT
ZION LUTHERAN CHURCH 2313 S. HANNA ST FORT WAYNE, IN 46803	35-0895833	501(C)(3)	15,000.	0.			\$10,000 GENERAL FUND/\$5,000 THANK OFFERING
FRIENDS OF THE LINCOLN COLLECTION OF INDIANA INC - PO BOX 11083 - FORT WAYNE, IN 46855	35-2101024	501(C)(3)	56,250.	0.			UNRESTRICTED OPERATING; DIGITIZATION OF LINCOLN MATERIALS
GREATER FORT WAYNE CHAMBER OF COMMERCE FOUNDATION INC - 826 EWING ST - FORT WAYNE, IN 46802	31-0888275	501(C)(3)	34,400.	0.			FORT WAYNE CONVENTION AND VISITORS CENTER; GRADUATE RETENTION PROGRAM
HARLAN CHRISTIAN YOUTH CENTER INC PO BOX 467 HARLAN, IN 46743-0467	35-2125040	501(C)(3)	17,000.	0.			2010 PAYOUT; COMPUTERS
INDIANA UNIVERSITY FOUNDATION PO BOX 500 BLOOMINGTON, IN 47402	35-6018940	501(C)(3)	6,896.	0.			SCHOOL OF HEALTH AND REHABILITATION; JEWISH STUDIES PROGRAM; IU ATHLETICS; UNRESTRICTED

LHA

Schedule I (Form 990)

COMMUNITY FOUNDATION OF GREATER FORT

Schedule I (Form 990)

WAYNE INC.

35-1119450

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
INDIANA-PURDUE FOUNDATION FORT WAYNE - 2101 E COLISEUM BLVD - FORT WAYNE, IN 46805	35-6033698	501(C)(3)	35,830.	0.			BETTY G FISHMAN FINE ARTS ENDOWMENT FUND; COMMUNITY INDICATORS ANALYSIS; ATHLETIC SCHOLARSHIP
JUNIOR ACHIEVEMENT OF NORTHERN INDIANA INC - 601 NOBLE DR - FORT WAYNE, IN 46825	35-0922731	501(C)(3)	36,585.	0.			SPONSORSHIP FOR THE BEL AWARDS; BUSINESS HALL OF FAME; GOLF OUTING; FIBER OPTIC CONNECTIVITY;
LIBERTY YOUTH RANCH INC 27725 OLD 41 RD, STE 104 BONITA SPRINGS, FL 34135	38-3674666	501(C)(3)	100,000.	0.			UNRESTRICTED OPERATING SUPPORT
LIFELINE YOUTH AND FAMILY SERVICES INC - 7136 GETTYSBURG PIKE - FORT WAYNE, IN 46804	35-1167389	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT
LINDENWOOD CEMETERY 2324 W MAIN ST FORT WAYNE, IN 46808	35-0472940	501(C)(13)	25,000.	0.			150TH ANNIVERSARY CELEBRATION
LITERACY ALLIANCE INC 709 CLAY ST, STE 100 FORT WAYNE, IN 46802	35-1710780	501(C)(3)	33,508.	0.			2010 DISTRIBUTION; GENERAL OPERATING SUPPORT
LUTHERAN OUTDOOR MINISTRIES, INDIANA-KENTUCKY SYNOD ELCA - 5215 N 450 W - ANGOLA, IN 46703	35-1746739	501(C)(3)	10,000.	0.			TO BUILD A CABIN AT CAMP LUTHERWALD
MUSTARD SEED FURNITURE BANK OF FORT WAYNE INC - 3636 ILLINOIS RD - FORT WAYNE, IN 46804	35-2149283	501(C)(3)	25,250.	0.			UNRESTRICTED OPERATING SUPPORT
NORTHEAST INDIANA PUBLIC RADIO INC PO BOX 8459 FORT WAYNE, IN 46898-8459	35-1514924	501(C)(3)	20,531.	0.			UNRESTRICTED OPERATING SUPPORT; 2010 PAYOUT

LHA

Schedule I (Form 990)

COMMUNITY FOUNDATION OF GREATER FORT

Schedule I (Form 990)

WAYNE INC.

35-1119450

Page 1

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RONALD MCDONALD HOUSE OF INDIANA INC - 435 LIMESTONE ST - INDIANAPOLIS, IN 46202	35-1497202	501(C)(3)	12,000.	0.			ALLEN CONTY FAMILY ASSISTANCE
SISTERS OF PROVIDENCE ONE SISTERS OF PROVIDENCE - ST-MARY-OF-THE-WOODS, IN 47867-1093	35-0868174	501(C)(3)	6,100.	0.			ANNUAL FUND
SOUTHWEST LUTHERAN CHURCH 5120 HOMESTEAD ROAD FORT WAYNE, IN 46814	04-3661503	501(C)(3)	10,000.	0.			GENERAL OPERATING SUPPORT; CAPITAL CAMPAIGN
ST JOSEPH COMMUNITY HEALTH FOUNDATION INC - 2826 S CALHOUN ST - FORT WAYNE, IN 46807	31-1016570	501(C)(3)	25,000.	0.			OPERATING SUPPORT FOR CATHERINE KASPER PLACE
THE CHAPEL 2505 W HAMILTON RD S FORT WAYNE, IN 46814	35-1930152	501(C)(3)	13,000.	0.			HAITIAN PROGRAMS; SUPPORT FOR SANCTUARY; QUARTERLY CONTRIBUTION
THE NEW SONG MISSION INC PO BOX 488 NASHVILLE, IN 47448	80-0082755	501(C)(3)	8,000.	0.			CONSTRUCTION FUNDS
UNITARIAN UNIVERSALIST ASSOCIATION 25 BEACON ST BOSTON, MA 02108	04-2103733	501(C)(3)	10,000.	0.			JOHN AND JULIA OLDENKAMP MUSIC FUND
UNITY CHRIST CHURCH OF FORT WAYNE INC - 3232 CRESCENT AVE - FORT WAYNE, IN 46805-1502	35-6036913	501(C)(3)	10,700.	0.			RICHARD MANTEI'S INVOICE; UNRESTRICTED OPERATING SUPPORT; RAMP REPAIR; ABC PROGRAM
UNITY SCHOOL OF CHRISTIANITY 1901 NW BLUE PKWY UNITY VILLAGE, MO 64065	44-0546000	501(C)(3)	9,450.	0.			NEW CHAIRS FOR UNITY INN; MEETING EXPENSES; FOUNTAIN CELEBRATION

LHA

Schedule I (Form 990)

COMMUNITY FOUNDATION OF GREATER FORT

Schedule I (Form 990)

WAYNE INC.

35-1119450

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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VISITING NURSE AND HOSPICE HOME INC - 5910 HOMESTEAD RD - FORT WAYNE, IN 46814	35-1687026	501(C)(3)	50,250.	0.			PHONE SYSTEM AND SERVER; UNRESTRICTED OPERATING SUPPORT
YWCA NORTHEAST INDIANA INC 1610 SPY RUN AVE FORT WAYNE, IN 46805-4033	35-0868220	501(C)(3)	50,000.	0.			YWCA TECHNOLOGY SYSTEM RENOVATION

COMMUNITY FOUNDATION OF GREATER FORT

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to 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 non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SCHOLARSHIPS	68	263,035.	0.		

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2: THE ORGANIZATION MONITORS ITS GRANTS TO ENSURE THAT GRANTS ARE USED FOR PROPER PURPOSES AND ARE NOT DIVERTED FROM THE INTENDED USE. CERTAIN GRANTS TO ORGANIZATIONS REQUIRE SIGNED GRANT AGREEMENTS AS WELL AS PERIODIC REPORTS AND/OR FIELD INVESTIGATIONS PRIOR TO INITIAL AND/OR FUTURE PAYMENTS. CERTAIN GRANTS AWARDED TO INDIVIDUALS REQUIRE MONITORING THE USE OF GRANT FUNDS BY OBTAINING A REPORT OF A RECIPIENT'S WORK FOR EACH ACADEMIC PERIOD. THE ORGANIZATION RESERVES THE RIGHT TO CANCEL OR RESCIND ITS GRANT SUPPORT AT ANY TIME SHOULD THERE BE A SUBSTANTIAL CHANGE AFFECTING THE RECIPIENT ORGANIZATION OR INDIVIDUAL.

Part IV Supplemental Information

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT:

ALLEN COUNTY FORT WAYNE HISTORICAL SOCIETY INC

(H) PURPOSE OF GRANT OR ASSISTANCE: 2010 PAYOUT;GENERAL OPERATING

SUPPORT; COMPUTER UPGRADES; ALLEN COUNTY EXHIBITION GALLERY; BUFFALO TRO
EVENT

NAME OF ORGANIZATION OR GOVERNMENT:

ALLEN COUNTY PUBLIC LIBRARY FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: UNRESTRICTED OPERATING SUPPORT; PAUL

CLARKE NONPROFIT RESOURCE CENTER; ORGANIZATIONAL EFFECTIVENESS SERVICES;
NE INDIANA RADIO READING SVS.

NAME OF ORGANIZATION OR GOVERNMENT: ARTS UNITED OF GREATER FORT WAYNE

(H) PURPOSE OF GRANT OR ASSISTANCE: UNRESTRICTED OPERATING SUPPORT;

TECHNOLOGY EQUIPMENT; SOFTWARE ENHANCEMENTS; ANNUAL FUND DRIVE

NAME OF ORGANIZATION OR GOVERNMENT: ERINS HOUSE FOR GRIEVING CHILDREN INC

(H) PURPOSE OF GRANT OR ASSISTANCE: UNRESTRICTED OPERATING SUPPORT; KIDS

CHRISTMAS PROGRAM; AUTOMATED EXTERNAL DEFIBRILLATOR FOR PROGRAM NIGHTS

NAME OF ORGANIZATION OR GOVERNMENT:

TURNSTONE CENTER FOR CHILDREN AND ADULTS WITH DISABILITIES INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: 2010 PAYOUT; UNRESTRICTED OPERATING

SUPPORT; INTERNET BASED TRAINING PROJECT; TUITION FOR STUDENTS; GALA
CONTRIBUTION

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: YMCA OF GREATER FORT WAYNE

(H) PURPOSE OF GRANT OR ASSISTANCE: 2010 PAYOUT; PARTNER WITH YOUTH; RIVER CITY RAT RACE; STRONG KIDS; OLD FORT/RENAISSANCE POINTE PROGRAMS

NAME OF ORGANIZATION OR GOVERNMENT: INDIANA UNIVERSITY FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: SCHOOL OF HEALTH AND REHABILITATION; JEWISH STUDIES PROGRAM; IU ATHLETICS; UNRESTRICTED OPERATING SUPPORT REHABILITATION

NAME OF ORGANIZATION OR GOVERNMENT: INDIANA-PURDUE FOUNDATION FORT WAYNE

(H) PURPOSE OF GRANT OR ASSISTANCE: BETTY G FISHMAN FINE ARTS ENDOWMENT FUND; COMMUNITY INDICATORS ANALYSIS; ATHLETIC SCHOLARSHIP FUND; VISUAL & PERFORMING ARTS; USHENKA PAINTING; MUSIC DEPARTMENT

NAME OF ORGANIZATION OR GOVERNMENT:

JUNIOR ACHIEVEMENT OF NORTHERN INDIANA INC

(H) PURPOSE OF GRANT OR ASSISTANCE: SPONSORSHIP FOR THE BEL AWARDS; BUSINESS HALL OF FAME; GOLF OUTING; FIBER OPTIC CONNECTIVITY; UNRESTRICTED OPERATING SUPPORT

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization **COMMUNITY FOUNDATION OF GREATER FORT WAYNE INC.** Employer identification number **35-1119450**

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	18	442,961.	FAIR MARKET VALUE
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** 0

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization COMMUNITY FOUNDATION OF GREATER FORT WAYNE INC.	Employer identification number 35-1119450
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FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
PROMOTING EFFECTIVE GRANTMAKING, FOSTERING PHILANTHROPY, STIMULATING
COMMUNITY DIALOGUE, AND HELPING DONORS ACHIEVE THEIR CHARITABLE GOALS.

FORM 990, PART VI, SECTION A, LINE 2: BUSINESS RELATIONSHIP CONSISTS OF
TWO DIRECTORS WHO SHARE THE SAME EMPLOYER. DIRECTORS HOWARD CHAPMAN AND
THOMAS KIMBROUGH ARE BOTH EMPLOYED BY BARRETT & MCNAGNY. DIRECTORS MARCIA
TAPP-SANDERS AND GREG JOHNSON ARE BOTH EMPLOYED BY FORT WAYNE NEWSPAPERS.

FORM 990, PART VI, SECTION A, LINE 4: THE BYLAWS WERE CHANGED TO READ:
"THE NUMBER OF DIRECTORS SHALL BE EITHER FIFTEEN OR SIXTEEN." THE BYLAWS
PREVIOUSLY READ: "THE NUMBER OF DIRECTORS SHALL BE FIFTEEN." IN ADDITION,
THE ORGANIZATION'S EXEMPT MISSION CHANGED TO READ: "TO SERVE AS A
COMMUNITY LEADER TO IMPROVE THE QUALITY OF LIFE BY BUILDING PERMANENT
ENDOWMENTS, PROMOTING EFFECTIVE GRANTMAKING, FOSTERING PHILANTHROPY,
STIMULATING COMMUNITY DIALOGUE, AND HELPING DONORS ACHIEVE THEIR CHARITABLE
GOALS." THE MISSION PREVIOUSLY READ: "TO BUILD PUBLIC GIVING PARTNERSHIPS
THAT EFFECTIVELY CONNECT DONORS WITH NONPROFIT ORGANIZATIONS AND COMMUNITY
PROJECTS TO PRODUCE A BRIGHTER FUTURE FOR ALL PEOPLE IN ALLEN COUNTY."

FORM 990, PART VI, SECTION B, LINE 11: THE ORGANIZATION'S OFFICERS AND
DIRECTORS WERE PROVIDED A COPY OF THE ORGANIZATION'S FINAL FORM 990,
INCLUDING REQUIRED SCHEDULES, ON AUGUST 11 AS ULTIMATELY FILED WITH THE
IRS. PRIOR TO DISTRIBUTION TO OFFICERS AND DIRECTORS, MANAGEMENT AND THE
AUDIT COMMITTEE OF THE COMMUNITY FOUNDATION OF GREATER FORT WAYNE REVIEWED
THE FORM 990 AT A MEETING HELD ON JULY 21.

Name of the organization	COMMUNITY FOUNDATION OF GREATER FORT WAYNE INC.	Employer identification number	35-1119450
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FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION'S OFFICERS AND DIRECTORS ARE REQUIRED TO ANNUALLY, AND AS INFORMATION CHANGES, DISCLOSE INTERESTS THAT COULD GIVE RISE TO CONFLICTS BY COMPLETING AND SIGNING A STATEMENT OF AFFIRMATION AND CONFLICT OF INTEREST DISCLOSURE STATEMENT. THE INFORMATION IS SUMMARIZED IN A SPEADSHEET AND DISTRIBUTED TO THE ORGANIZATION'S BOARD PRESIDENT PRIOR TO BOARD MEETINGS. DURING BOARD MEETINGS, ANY POSSIBLE CONFLICTS ARE DISCLOSED BEFORE DISCUSSION BEGINS AND THE MINUTES OF THE MEETING REFLECT ANY DISCLOSURE. AFTER ACKNOWLEDGING THE POTENTIAL CONFLICT, THE INTERESTED PERSON MAY BRIEFLY ADDRESS THE OTHER MEMBERS REGARDING THE MATTER. THE INTERESTED PERSON MAY ALSO ANSWER PERTINENT QUESTIONS SINCE PERSONAL KNOWLEDGE ON THE ISSUE MAY BE OF ASSISTANCE TO THE OTHER MEMBERS IN REACHING THEIR DECISIONS. THE INTERESTED PERSON, HOWEVER, WILL ABSTAIN FROM VOTING ON THE ISSUE.

FORM 990, PART VI, SECTION B, LINE 15: THE ORGANIZATION'S PROCESS FOR DETERMINING COMPENSATION OF THE EXECUTIVE DIRECTOR INCLUDES AN ANNUAL COMPENSATION REVIEW AND APPROVAL BY THE ORGANIZATION'S OFFICERS OF THE BOARD, WHICH INCLUDES COMPARISONS OF COMPENSATION FOR SIMILARLY QUALIFIED PERSONS IN COMPARABLE POSITIONS AT SIMILAR ORGANIZATIONS. DISCUSSION REGARDING THE COMPENSATION ARRANGEMENT IS CONTEMPORANEOUSLY DOCUMENTED AND MAINTAINED BY THE BOARD PRESIDENT.

THE ORGANIZATION'S PROCESS FOR DETERMINING COMPENSATION OF OFFICERS OF THE CORPORATION, OTHER THAN THE EXECUTIVE DIRECTOR, INCLUDES AN ANNUAL COMPENSATION REVIEW AND APPROVAL BY THE ORGANIZATION'S OFFICERS OF THE BOARD, WHICH INCLUDES COMPARISONS OF COMPENSATION FOR SIMILARLY QUALIFIED PERSONS IN COMPARABLE POSITIONS AT SIMILAR ORGANIZATIONS. DISCUSSION

Name of the organization	COMMUNITY FOUNDATION OF GREATER FORT WAYNE INC.	Employer identification number	35-1119450
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REGARDING THE COMPENSATION ARRANGEMENT IS CONTEMPORANEOUSLY DOCUMENTED AND MAINTAINED BY THE EXECUTIVE DIRECTOR.

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 THROUGH ITS WEB SITE, AND BY PROVIDING COPIES UPON REQUEST OR INSPECTION AT THE OFFICE OF THE COMMUNITY FOUNDATION OF GREATER FORT WAYNE.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED GAINS ON INVESTMENTS:	8,747,155.
NET CONTRIBUTIONS FROM AGENCY ENDOWMENTS	43,411.
TOTAL TO FORM 990, PART XI, LINE 5	8,790,566.

FORM 990, PART XI, LINE 2

THE ORGANIZATION'S FINANCIAL STATEMENTS WERE AUDITED AS PART OF A CONSOLIDATED AUDIT PERFORMED BY AN INDEPENDENT ACCOUNTING FIRM. THE CONSOLIDATED AUDIT INCLUDES THE COMMUNITY FOUNDATION AND ITS SUPPORTING ORGANIZATIONS. THE COMMUNITY FOUNDATION MAINTAINS AN AUDIT COMMITTEE WHICH ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT, AS WELL AS SELECTION OF AN INDEPENDENT AUDIT FIRM.

FORM 990, PART I, LINE 6

THE COMMUNITY FOUNDATION OF GREATER FORT WAYNE IS FORTUNATE TO HAVE A WIDE GROUP OF PROFESSIONALS DEDICATED TO SERVING AS VOLUNTEERS FOR THE ORGANIZATION. VOLUNTEER OPPORTUNITIES RANGE FROM SERVING ON THE BOARD OF DIRECTORS TO VARIOUS COMMITTEE POSITIONS INCLUDING GRANT REVIEW,

Name of the organization COMMUNITY FOUNDATION OF GREATER FORT WAYNE INC.	Employer identification number 35-1119450
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TECHNOLOGY GRANT ADVISORS, SCHOLARSHIP SELECTION, AND INVESTMENT, AUDIT, AND PERSONNEL COMMITTEES. EACH OF THE COMMITTEES PROVIDES THE ORGANIZATION WITH VALUABLE ADVICE AND GUIDANCE WHICH AIDS THE ORGANIZATION IN MEETING ITS MISSION IN AN EFFICIENT AND EFFECTIVE MANNER. THE ORGANIZATION ESTIMATES THAT 60 VOLUNTEERS PROVIDE OVER 1,000 HOURS PER YEAR IN DONATED SERVICE OF TIME TO THE ORGANIZATION.

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization **COMMUNITY FOUNDATION OF GREATER FORT WAYNE INC.** Employer identification number **35-1119450**

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

(a) Name, address, and EIN 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

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to 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
COMMUNITY PARTNERSHIPS INC 555 E. WAYNE STREET FT WAYNE, IN 46802	SUPPORTS CHARITABLE COMMUNITY PROJECTS.	INDIANA	501(C)(3)	11			X
FORT WAYNE CENTRAL IMPROVEMENT FOUNDATION INC., 555 E. WAYNE STREET, FT WAYNE, IN 46802	MANAGES REAL ESTATE DONATIONS FOR THE BENEFIT OF COMMUNITY FOUNDATION	INDIANA	501(C)(3)	11			X

COMMUNITY FOUNDATION OF GREATER FORT

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

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

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 other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) FORT WAYNE CENTRAL IMPROVEMENT INC	Q	60,554.	FMV
FORT WAYNE CENTRAL IMPROVEMENT INC,			
(2) COMMUNITY PARTNERSHIPS INC	R	90,811.	FMV
(3)			
(4)			
(5)			
(6)			

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

Multiple horizontal lines for supplemental information.

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

2010

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury Internal Revenue Service

For calendar year 2010 or other tax year beginning , and ending

Form sections A through G containing organization details: Name (COMMUNITY FOUNDATION OF GREATER FORT WAYNE INC.), Address (555 E. WAYNE STREET, FORT WAYNE, IN 46802), and Book value of all assets at end of year (89,641,522).

Section H: Describe the organization's primary unrelated business activity. Section I: During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?

J The books are in care of DAVID BENNETT Telephone number 260-426-4083

Table for Part I: Unrelated Trade or Business Income. Columns: (A) Income, (B) Expenses, (C) Net. Rows 1a-13 showing total income of 0.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)

Table for Part II: Deductions Not Taken Elsewhere. Rows 14-34 showing total deductions of 1,000 and final unrelated business taxable income of 0.

Part III Tax Computation

Table with 2 columns: Description and Amount. Rows include Organizations Taxable as Corporations (35), Trusts Taxable at Trust Rates (36), Proxy tax (37), Alternative minimum tax (38), and Total (39).

Part IV Tax and Payments

Table with 2 columns: Description and Amount. Rows include Foreign tax credit (40a-40e), Other taxes (42), Total tax (43), Payments (44a-44g), Estimated tax penalty (46), Tax due (47), Overpayment (48), and Refunded amount (49).

Part V Statements Regarding Certain Activities and Other Information (see instructions)

Table with 3 columns: Question, Yes, No. Questions 1, 2, and 3 regarding foreign accounts, foreign trusts, and tax-exempt interest.

Schedule A - Cost of Goods Sold. Enter method of inventory valuation N/A

Table with 2 columns: Description and Amount. Rows include Inventory at beginning/end of year (1, 6), Purchases (2), Cost of labor (3), Additional section 263A costs (4a, 4b), and Total (5).

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.

Sign Here: Signature of officer, Date, EXECUTIVE DIRECTOR, Title. Includes a box for 'May the IRS discuss this return with the preparer shown below?' with Yes checked.

Paid Preparer Use Only: Print/Type preparer's name (TODD E. HAINES), Preparer's signature, Date, Check self-employed, PTIN (P00691953), Firm's name (HAINES, ISENBARGER & SKIBA, LLC), Firm's EIN (52-2127371), Firm's address (FORT WAYNE, IN 46804), Phone no. ((260) 436-9500).

Check if: Change of Address
 Amended Report
 Final Report: Indicate Date Closed _____

Indiana Department of Revenue
Indiana Nonprofit Organization's Annual Report

NP-20
 State Form 51062
 (R3 / 3-10)

For the Calendar Year or Fiscal Year
 Beginning 01/01/2010 and Ending 12/31/2010
MM/DD/YYYY MM/DD/YYYY

Due on the 15th day of the 5th month following the end of the tax year.
NO FEE REQUIRED.

Name of Organization COMMUNITY FOUNDATION OF GREATER FORT WAYNE INC.		Telephone Number 260-426-4083
Address 555 E. WAYNE STREET	County ALLEN	Indiana Taxpayer Identification Number
City FORT WAYNE, IN 46802	State ZIP Code	Federal Identification Number 35-1119450
Printed Name of Person to Contact DAVID J. BENNETT		Contact's Telephone Number 260-426-4083

If you are filing a federal return, attach a completed copy of Form 990, 990EZ, or 990PF.

Note: If your organization has unrelated business income of more than \$1,000 as defined under **Section 513** of the Internal Revenue Code, **you must also file Form IT-20NP.**

Current Information

1. Have any changes not previously reported to the Department been made in your governing instruments, (e.g.) articles of incorporation, bylaws, or other instruments of similar importance? If yes, attach a detailed description of changes. **SEE STATEMENT 1**
2. Indicate number of years your organization has been in continuous existence. 55
3. Attach a schedule, listing the names, titles and addresses of your current officers. **SEE STATEMENT 2**
4. Briefly describe the purpose or mission of your organization below.

TO SERVE AS A COMMUNITY LEADER TO IMPROVE THE QUALITY OF LIFE BY BUILDING PERMANENT ENDOWMENTS, PROMOTING EFFECTIVE GRANTMAKING, FOSTERING PHILANTHROPY, STIMULATING COMMUNITY DIALOGUE, AND HELPING DONORS ACHIEVE THEIR CHARITABLE GOALS.

HLUDWIG@CFGFW.ORG

Email Address:

I declare under the penalties of perjury that I have examined this return, including all attachments, and to the best of my knowledge and belief, it is true, complete, and correct.

EXECUTIVE DIRECTOR

Signature of Officer or Trustee

Title

Date

Name of Person(s) to Contact

Daytime Telephone Number

Important: Please submit this completed form and/or extension to:
 Indiana Department of Revenue, Tax Administration
 P.O. Box 7147
 Indianapolis, IN 46207-7147
 Telephone: (317) 233-4015

Extensions of Time to File

The Department recognizes the Internal Revenue Service application for automatic extension of time to file, Form 8868. **Please forward a copy of your federal extension, identified with your Nonprofit Taxpayer Identification Number (TID), to the Indiana Department of Revenue, Tax Administration by the original due date to prevent cancellation of your sales tax exemption.** Always indicate your Indiana Taxpayer Identification number on your request for an extension of time to file.

Reports post marked within thirty (30) days after the federal extension due date, as requested on Federal Form 8868, will be considered as timely filed. A copy of the federal extension must also be attached to the Indiana report. In the event that a federal extension is not needed, a taxpayer may request in writing an Indiana extension of time to file from the: Indiana Department of Revenue, Tax Administration, P.O. Box 7147, Indianapolis, IN 46207-7147, (317) 233-4015.

If Form NP-20 or extension is not timely filed, the taxpayer will be notified by the Department pursuant to I.C. 6-2.5-5-21(d), to file Form NP-20. If within sixty (60) days after receiving such notice the taxpayer does not file Form NP-20, the taxpayer's exemption from sales tax will be canceled.

FORM NP-20

EXPLANATION OF CHANGES IN GOVERNING
INSTRUMENT, ARTICLES OF INCORPORATION, ETC.
PART I, LINE 1

STATEMENT 1

THE ORGANIZATION'S BYLAWS WERE CHANGED. THE BYLAWS CURRENTLY READ:
"THE NUMBER OF DIRECTORS SHALL BE FIFTEEN OR SIXTEEN." THE BYLAWS
PREVIOUSLY READ: "THE NUMBER OF DIRECTORS SHALL BE FIFTEEN." IN
ADDITION, THE ORGANIZATION'S EXEMPT MISSION WAS CHANGED. THE MISSION
CURRENTLY READS: "TO SERVE AS A COMMUNITY LEADER TO IMPROVE THE
QUALITY OF LIFE BY BUILDING PERMANENT ENDOWMENTS, PROMOTING EFFECTIVE
GRANTMAKING, FOSTERING PHILANTHROPY, STIMULATING COMMUNITY DIALOGUE,
AND HELPING DONORS ACHIEVE THEIR CHARITABLE GOALS." THE MISSION
PREVIOUSLY READ: "TO BUILD PUBLIC GIVING PARTNERSHIPS THAT
EFFECTIVELY CONNECT DONORS WITH NONPROFIT ORGANIZATIONS AND COMMUNITY
PROJECTS TO PRODUCE A BRIGHTER FUTURE FOR ALL PEOPLE IN ALLEN COUNTY."

FORM NP-20

LIST OF OFFICERS, DIRECTORS AND TRUSTEES

STATEMENT 2

NAME AND ADDRESS

TITLE

TRACY L. SHELLABARGER
555 E WAYNE STREET
FT WAYNE, IN 46802

PRESIDENT

KATHY CALLEN
555 E WAYNE STREET
FT WAYNE, IN 46802

VICE PRESIDENT

TODD STEPHENSON
555 E WAYNE STREET
FT WAYNE, IN 46802

TREASURER

HOWARD CHAPMAN
555 E WAYNE STREET
FT WAYNE, IN 46802

SECRETARY

DARRELL BLANTON
555 E WAYNE STREET
FT WAYNE, IN 46802

TREASURER

ANDREW BROOKS
555 E WAYNE STREET
FT WAYNE, IN 46802

DIRECTOR

CAROL A. DURHAM
555 E WAYNE STREET
FT WAYNE, IN 46802

DIRECTOR

GREGORY A. JOHNSON
555 E WAYNE STREET
FT WAYNE, IN 46802

DIRECTOR

THOMAS M. KIMBROUGH
555 E WAYNE STREET
FT WAYNE, IN 46802

DIRECTOR

ANNETTE TEDERS
555 E WAYNE STREET
FT WAYNE, IN 46802

DIRECTOR

MARCIA TAPP-SANDERS
555 E WAYNE STREET
FT WAYNE, IN 46802

DIRECTOR

RISE TAYLOR
555 E WAYNE STREET
FT WAYNE, IN 46802

DIRECTOR

W. PAUL WOLF 555 E WAYNE STREET FT WAYNE, IN 46802	DIRECTOR
JAMES M. VANN 555 E WAYNE STREET FT WAYNE, IN 46802	DIRECTOR
JANE GERARDOT 555 E WAYNE STREET FT WAYNE, IN 46802	SECRETARY
CAROL LINDQUIST 555 E WAYNE STREET FT WAYNE, IN 46802	DIRECTOR
IAN BOYCE 555 E. WAYNE STREET FORT WAYNE, IN 46802	DIRECTOR
DAVID BENNETT 555 E WAYNE STREET FT WAYNE, IN 46802	EXECUTIVE DIRECTOR
HEIDI LUDWIG 555 E WAYNE STREET FT WAYNE, IN 46802	ASSOCIATE DIRECTOR