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TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

DECEMBER 31, 2020

PREPARED FOR:

THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM
2100 1ST AVENUE NORTH NO. 700
BIRMINGHAM, AL 35203

PREPARED BY:

WARREN AVERETT, LLC
2500 ACTON ROAD
BIRMINGHAM, AL 35243

AMOUNT DUE OR REFUND:

NOT APPLICABLE

MAKE CHECK PAYABLE TO:

NOT APPLICABLE

MAIL TAX RETURN AND CHECK (IF APPLICABLE) TO:

NOT APPLICABLE

RETURN MUST BE MAILED ON OR BEFORE:

NOT APPLICABLE

SPECIAL INSTRUCTIONS:

THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE SIGN, DATE, AND RETURN FORM 8879-EO TO OUR OFFICE. WE WILL THEN SUBMIT THE ELECTRONIC RETURN TO THE IRS. DO NOT MAIL A PAPER COPY OF THE RETURN TO THE IRS. RETURN FORM 8879-EO TO US BY NOVEMBER 15, 2021

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-0047

Form **8879-EO**

For calendar year 2020, or fiscal year beginning _____, 2020, and ending _____, 20____

2020Department of the Treasury
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**
▶ **Go to www.irs.gov/Form8879EO for the latest information.**

Name of exempt organization or person subject to tax

**THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM**

Taxpayer identification number

63-1209631

Name and title of officer or person subject to tax

**CHRISTOPHER NANNI
PRESIDENT & CEO****Part I Type of Return and Return Information** (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a, 5a, 6a, or 7a** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, 5b, 6b, or 7b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

| | | |
|---|---|------------------------------|
| 1a Form 990 check here ▶ <input checked="" type="checkbox"/> | b Total revenue, if any (Form 990, Part VIII, column (A), line 12) | 1b <u>34,137,645.</u> |
| 2a Form 990-EZ check here ▶ <input type="checkbox"/> | b Total revenue, if any (Form 990-EZ, line 9) | 2b _____ |
| 3a Form 1120-POL check here ▶ <input type="checkbox"/> | b Total tax (Form 1120-POL, line 22) | 3b _____ |
| 4a Form 990-PF check here ▶ <input type="checkbox"/> | b Tax based on investment income (Form 990-PF, Part VI, line 5) | 4b _____ |
| 5a Form 8868 check here ▶ <input type="checkbox"/> | b Balance due (Form 8868, line 3c) | 5b _____ |
| 6a Form 990-T check here ▶ <input type="checkbox"/> | b Total tax (Form 990-T, Part III, line 4) | 6b _____ |
| 7a Form 4720 check here ▶ <input type="checkbox"/> | b Total tax (Form 4720, Part III, line 1) | 7b _____ |

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that ☒ I am an officer of the above organization or ☐ I am a person subject to tax with respect to (name of organization) _____, (EIN) _____ and that I have examined a copy

of the 2020 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

☒ I authorize **WARREN AVERETT, LLC** to enter my PIN **35243**
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer or person subject to tax with respect to the organization, I will enter my PIN as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax ▶ ***** THIS IS NOT A FILEABLE COPY *** Date ▶

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

63914418995

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ _____ Date ▶ **08/12/21**

ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

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

OMB No. 1545-0047

2020Open to Public
Inspection**A For the 2020 calendar year, or tax year beginning and ending****B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization**THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM**

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
2100 1ST AVENUE NORTH 700City or town, state or province, country, and ZIP or foreign postal code
BIRMINGHAM, AL 35203**F** Name and address of principal officer: **CHRISTOPHER NANNI
SAME AS C ABOVE****D** Employer identification number**63-1209631****E** Telephone number**205-327-3800****G** Gross receipts \$ **121,462,588.****H(a)** Is this a group returnfor subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. See instructions

H(c) Group exemption number ▶ **8143****I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ **WWW.CFBHAM.ORG****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: **1997****M** State of legal domicile: **AL****Part I Summary**

| | | | |
|---|--|----------------------------------|---------------------|
| Activities & Governance | 1 Briefly describe the organization's mission or most significant activities: WE IGNITE PASSION FOR TRANSFORMATIONAL CHANGE THROUGH GRANTMAKING, CONVENING & LEADING, AS | | |
| | 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 | 17 |
| | 4 Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 17 |
| | 5 Total number of individuals employed in calendar year 2020 (Part V, line 2a) | 5 | 17 |
| | 6 Total number of volunteers (estimate if necessary) | 6 | 27 |
| | 7a Total unrelated business revenue from Part VIII, column (C), line 12 | 7a | 85,594. |
| b Net unrelated business taxable income from Form 990-T, Part I, line 11 | 7b | 58,551. | |
| Revenue | 8 Contributions and grants (Part VIII, line 1h) | Prior Year | Current Year |
| | 9 Program service revenue (Part VIII, line 2g) | 17,624,095. | 26,167,948. |
| | 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) | 28,049,834. | 7,876,318. |
| | 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 27,668. | 93,379. |
| Expenses | 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) | 45,701,597. | 34,137,645. |
| | 14 Benefits paid to or for members (Part IX, column (A), line 4) | 22,884,021. | 24,161,328. |
| | 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) | 1,380,109. | 1,509,250. |
| | b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,183,239. | 0. | 0. |
| | 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | 1,893,608. | 1,390,111. |
| | 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | 26,157,738. | 27,060,689. |
| 19 Revenue less expenses. Subtract line 18 from line 12 | 19,543,859. | 7,076,956. | |
| 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) | 238,658,261. | 264,438,081. |
| | 22 Net assets or fund balances. Subtract line 21 from line 20 | 16,915,471. | 16,145,863. |
| | | 221,742,790. | 248,292,218. |

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 | | | |
| | CHRISTOPHER NANNI, PRESIDENT & CEO Type or print name and title | | | | |
| Paid Preparer Use Only | Print/Type preparer's name MEGAN RANDOLPH | Preparer's signature | Date 08/12/21 | Check if self-employed <input type="checkbox"/> | PTIN P00989558 |
| | Firm's name ▶ WARREN AVERETT, LLC | Firm's EIN ▶ 45-4084437 | Phone no. 205-979-4100 | | |
| Firm's address ▶ 2500 ACTON ROAD BIRMINGHAM, AL 35243 | | | | | |

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM

Form 990 (2020)

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Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

**THE MISSION OF THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM IS TO
IGNITE PASSION FOR TRANSFORMATIONAL CHANGE IN OUR COMMUNITY.**

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

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

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **19,452,482.** including grants of \$ **18,758,710.**) (Revenue \$ **6,000.**)

**THE COMMUNITY FOUNDATION LEVERAGES GIFTS AND BEQUESTS AND WORKS TO
IMPROVE THE LIFE OF THE GREATER BIRMINGHAM REGION IN PARTNERSHIP WITH
GRANTS FROM DONOR ADVISED, DESIGNATED, AND SCHOLARSHIP FUNDS.**

4b (Code:) (Expenses \$ **5,594,731.** including grants of \$ **5,402,618.**) (Revenue \$)

**WITH ITS FLEXIBLE FUNDS, THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM
STRIVES TO DRIVE POSITIVE CHANGE IN OUR FIVE-COUNTY AREA BY SUPPORTING
PROGRAMS, PROJECTS AND CAPITAL IMPROVEMENTS THAT WILL HAVE A PROFOUND
IMPACT ON A BROAD RANGE OF IMPORTANT ISSUES AND AREAS OF COMMUNITY
LIFE, INCLUDING IMPROVEMENTS IN EDUCATION AND HEALTH, VIBRANT
COMMUNITIES WITH ARTS AND CULTURAL OPPORTUNITIES AND ECONOMIC SECURITY
FOR INDIVIDUALS AND FAMILIES.**

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

4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **25,047,213.**

**THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM**

Form 990 (2020)

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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 <i>Schedule B, Schedule of Contributors</i> ? | 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 for which 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, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> | | X |
| 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in 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 and XII</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 and XII 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, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <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 other assistance to or for any foreign organization? <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 other assistance to or for foreign individuals? <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 hospital facilities? <i>If "Yes," complete Schedule H</i> | | X |
| b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | | |
| 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> | X | |

**THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM**

Form 990 (2020)

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Part IV Checklist of Required Schedules (continued)

| | Yes | No |
|---|--------------|----|
| 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> | 22 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> | 23 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 25a</i> | 24a | X |
| b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | |
| 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? | 24c | |
| d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | |
| 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> | 25a | 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> | 25b | X |
| 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> | 26 | X |
| 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> | 27 | 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, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> | 28a | X |
| b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> | 28b | X |
| c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> | 28c | X |
| 29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> | 29 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> | 30 | X |
| 31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> | 31 | 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> | 32 | 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> | 33 | X |
| 34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> | 34 X | |
| 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a X | |
| b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> | 35b | X |
| 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> | 36 | 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> | 37 | X |
| 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O | 38 X | |

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

| | Yes | No |
|---|--------------|----|
| 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | 1a 15 | |
| 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 X | |

**THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM**

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

| | | Yes | No |
|--|--------------|------------|----|
| 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return | 2a 17 | | |
| b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | X | |
| Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | | |
| 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | X | |
| b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O | 3b | X | |
| 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | | X |
| b If "Yes," enter the name of the foreign country | | | |
| See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | | |
| 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | X |
| b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | 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 as charitable contributions? | 6a | | 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? | 7a | | X |
| b If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | |
| c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7c | X | |
| d If "Yes," indicate the number of Forms 8282 filed during the year | 7d 7 | | |
| e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | X |
| f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | X |
| g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | N/A | |
| h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | N/A | |
| 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? | N/A | 8 | |
| 9 Sponsoring organizations maintaining donor advised funds. | | | |
| a Did the sponsoring organization make any taxable distributions under section 4966? | N/A | 9a | |
| b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | N/A | 9b | |
| 10 Section 501(c)(7) organizations. Enter: | | | |
| a Initiation fees and capital contributions included on Part VIII, line 12 | N/A | 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 | N/A | 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 | N/A | 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? | N/A | 13a | |
| Note: See the instructions for additional information the organization must report on Schedule O. | | | |
| 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 on Schedule O | | 14b | |
| 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? | | 15 | X |
| If "Yes," see instructions and file Form 4720, Schedule N. | | | |
| 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? | | 16 | X |
| If "Yes," complete Form 4720, Schedule O. | | | |

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

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

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 1a 17 | | | |
| If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. | | | |
| b Enter the number of voting members included on line 1a, above, who are independent 1b 17 | | | |
| 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? | 2 | | X |
| 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? | 3 | | X |
| 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | X |
| 5 Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | X |
| 6 Did the organization have members or stockholders? | 6 | | X |
| 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? | 7a | | X |
| b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | 7b | | X |
| 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | |
| a The governing body? | 8a | X | |
| b Each committee with authority to act on behalf of the governing body? | 8b | 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 on Schedule O | 9 | | X |

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

| | | Yes | No |
|---|------------|----------|----------|
| 10a Did the organization have local chapters, branches, or affiliates? | 10a | | X |
| b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | | |
| 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | X | |
| b Describe in Schedule O the process, if any, used by the organization to review this Form 990. | | | |
| 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | X | |
| b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | X | |
| c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done | 12c | X | |
| 13 Did the organization have a written whistleblower policy? | 13 | X | |
| 14 Did the organization have a written document retention and destruction policy? | 14 | 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 | 15a | X | |
| b Other officers or key employees of the organization | 15b | 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? | 16a | | X |
| b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? | 16b | | |

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► **NONE**

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☒ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records ►
TERRI EPTING - 205-327-3800
2100 1ST AVENUE N., STE 700, BIRMINGHAM, AL 35203

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

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

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

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

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

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

| (A) Name and title | (B) Average hours per week (list any hours for related organizations below line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|---|--|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (1) CHRISTOPHER NANNI PRESIDENT/CEO | 40.00 0.00 | | | X | | | | 176,169. | 0. | 23,271. |
| (2) TERRI EPTING CHIEF FINANCIAL OFFICER | 40.00 0.00 | | | X | | | | 104,368. | 0. | 8,665. |
| (3) DANIEL COLEMAN DIRECTOR | 2.00 0.00 | X | | | | | | 0. | 0. | 0. |
| (4) GREGORY P. BUTRUS DIRECTOR | 4.00 0.00 | X | | | | | | 0. | 0. | 0. |
| (5) STEWART M. DANSBY DIRECTOR | 0.75 0.00 | X | | | | | | 0. | 0. | 0. |
| (6) DAVID GRAY DIRECTOR | 7.00 0.00 | X | | | | | | 0. | 0. | 0. |
| (7) BRIAN HAMILTON DIRECTOR | 1.50 0.00 | X | | | | | | 0. | 0. | 0. |
| (8) KATE R. DANELLA DIRECTOR | 0.75 0.00 | X | | | | | | 0. | 0. | 0. |
| (9) JUDGE WILLIAM HEREFORD DIRECTOR | 0.75 0.00 | X | | | | | | 0. | 0. | 0. |
| (10) SHEGUN OTULANA DIRECTOR | 0.50 0.00 | X | | | | | | 0. | 0. | 0. |
| (11) MIKE LUCE DIRECTOR | 0.50 0.00 | X | | | | | | 0. | 0. | 0. |
| (12) SUSAN MATLOCK DIRECTOR | 0.75 0.00 | X | | | | | | 0. | 0. | 0. |
| (13) SANJAY SINGH DIRECTOR | 1.00 0.00 | X | | | | | | 0. | 0. | 0. |
| (14) RAY WATTS, MD DIRECTOR | 0.25 0.00 | X | | | | | | 0. | 0. | 0. |
| (15) JARED WEINSTEIN DIRECTOR | 0.50 0.00 | X | | | | | | 0. | 0. | 0. |
| (16) MECHELLE WILDER DIRECTOR | 0.50 0.00 | X | | | | | | 0. | 0. | 0. |
| (17) LISSA TYSON DIRECTOR | 3.00 0.00 | X | | | | | | 0. | 0. | 0. |

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

| (A) Name and title | (B) Average hours per week (list any hours for related organizations below line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|--|---|--|-----------------------|---------|--------------|------------------------------|--------|---|---|--|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (18) EDGAR MARX, JR. DIRECTOR | 1.50 0.00 | X | | | | | | 0. | 0. | 0. |
| (19) CATHY WRIGHT DIRECTOR | 4.00 0.00 | X | | | | | | 0. | 0. | 0. |
| (20) MYLA CALHOUN DIRECTOR | 0.50 0.00 | X | | | | | | 0. | 0. | 0. |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 1b Subtotal | | | | | | | | 280,537. | 0. | 31,936. |
| c Total from continuation sheets to Part VII, Section A | | | | | | | | 0. | 0. | 0. |
| d Total (add lines 1b and 1c) | | | | | | | | 280,537. | 0. | 31,936. |

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

| | Yes | No |
|--|-----|----|
| 3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> | | 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? <i>If "Yes," complete Schedule J for such individual</i> | 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? <i>If "Yes," complete Schedule J for such person</i> | | 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. Report compensation for the calendar year ending with or within the organization's tax year.

| (A) Name and business address | (B) Description of services | (C) Compensation |
|----------------------------------|--------------------------------|---------------------|
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| | | |

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

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Part VIII Statement of Revenue

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

| | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512 - 514 |
|--|--|----------------|----------------------|----------------------|--|--------------------------------------|---|
| Contributions, Gifts, Grants and Other Similar Amounts | 1 a Federated campaigns | 1a | | | | | |
| | b Membership dues | 1b | | | | | |
| | c Fundraising events | 1c | | | | | |
| | d Related organizations | 1d | 272,234. | | | | |
| | e Government grants (contributions) | 1e | 234,800. | | | | |
| | f All other contributions, gifts, grants, and similar amounts not included above ... | 1f | 25,660,914. | | | | |
| | g Noncash contributions included in lines 1a-1f | 1g | \$ 13,470,783. | | | | |
| | h Total. Add lines 1a-1f | | | | | | |
| Program Service Revenue | | | Business Code | | | | |
| | 2 a | | | | | | |
| | 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) | | | 4,127,247. | | | 4,127,247. |
| | 4 Income from investment of tax-exempt bond proceeds | | | | | | |
| | 5 Royalties | | | 86,121. | | 85,594. | 527. |
| | | (i) Real | (ii) Personal | | | | |
| | 6 a Gross rents | 6a | | | | | |
| | b Less: rental expenses ... | 6b | | | | | |
| | c Rental income or (loss) | 6c | | | | | |
| | d Net rental income or (loss) | | | | | | |
| | | (i) Securities | (ii) Other | | | | |
| | 7 a Gross amount from sales of assets other than inventory | 7a | 91,074,014. | | | | |
| | b Less: cost or other basis and sales expenses | 7b | 87,324,943. | | | | |
| | c Gain or (loss) | 7c | 3,749,071. | | | | |
| | d Net gain or (loss) | | | 3,749,071. | | | 3,749,071. |
| | 8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 | | | 8a | | | |
| | b Less: direct expenses | | | 8b | | | |
| | c Net income or (loss) from fundraising events | | | | | | |
| | 9 a Gross income from gaming activities. See Part IV, line 19 | | | 9a | | | |
| | b Less: direct expenses | | | 9b | | | |
| c Net income or (loss) from gaming activities | | | | | | | |
| 10 a Gross sales of inventory, less returns and allowances | | | 10a | | | | |
| b Less: cost of goods sold | | | 10b | | | | |
| c Net income or (loss) from sales of inventory | | | | | | | |
| Miscellaneous Revenue | | | Business Code | | | | |
| | 11 a MISCELLANEOUS INCOME | | 900099 | 7,258. | 6,000. | | 1,258. |
| | b | | | | | | |
| | c | | | | | | |
| | d All other revenue | | | | | | |
| | e Total. Add lines 11a-11d | | | | 7,258. | | |
| 12 Total revenue. See instructions | | | | 34,137,645. | 6,000. | 85,594. | 7,878,103. |

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Part IX Statement of Functional Expenses

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

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

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|---|-----------------------|---------------------------------|--|-----------------------------|
| 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 | 23,990,722. | 23,990,722. | | |
| 2 Grants and other assistance to domestic individuals. See Part IV, line 22 | 160,106. | 160,106. | | |
| 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 | 10,500. | 10,500. | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 280,537. | 70,468. | 139,601. | 70,468. |
| 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 | 976,780. | 314,333. | 204,172. | 458,275. |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | 41,870. | 11,090. | 20,595. | 10,185. |
| 9 Other employee benefits | 120,104. | 34,834. | 49,005. | 36,265. |
| 10 Payroll taxes | 89,959. | 27,334. | 24,268. | 38,357. |
| 11 Fees for services (nonemployees): | | | | |
| a Management | | | | |
| b Legal | 25,787. | 8,912. | 13,517. | 3,358. |
| c Accounting | 54,950. | 5,495. | 32,970. | 16,485. |
| d Lobbying | 22,738. | 22,738. | | |
| e Professional fundraising services. See Part IV, line 17 | | | | |
| f Investment management fees | 794,735. | 238,421. | 230,473. | 325,841. |
| g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) | 22,147. | 13,714. | 5,207. | 3,226. |
| 12 Advertising and promotion | 3,936. | | 200. | 3,736. |
| 13 Office expenses | 30,317. | 7,287. | 8,612. | 14,418. |
| 14 Information technology | 77,448. | 19,754. | 13,230. | 44,464. |
| 15 Royalties | | | | |
| 16 Occupancy | 113,056. | 34,547. | 30,940. | 47,569. |
| 17 Travel | 2,024. | 432. | | 1,592. |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 Conferences, conventions, and meetings | 1,973. | 586. | 168. | 1,219. |
| 20 Interest | | | | |
| 21 Payments to affiliates | | | | |
| 22 Depreciation, depletion, and amortization | 55,591. | 16,781. | 15,817. | 22,993. |
| 23 Insurance | 12,822. | 3,918. | 3,509. | 5,395. |
| 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | | | | |
| a ANNUITY PAYMENTS | 56,210. | 16,863. | 16,301. | 23,046. |
| b INITIATIVES/GRANT CYCLE | 48,282. | 33,038. | | 15,244. |
| c DUES/SUBSCRIPTIONS | 20,197. | 1,647. | 16,345. | 2,205. |
| d MARKETING MATERIALS/PUB | 18,894. | | 2. | 18,892. |
| e All other expenses | 29,004. | 3,693. | 5,305. | 20,006. |
| 25 Total functional expenses. Add lines 1 through 24e | 27,060,689. | 25,047,213. | 830,237. | 1,183,239. |
| 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. | | | | |

Check here ☐ if following SOP 98-2 (ASC 958-720)

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Part X Balance Sheet

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

| | | (A) Beginning of year | | (B) End of year |
|--|--|--------------------------|--------------|--------------------|
| Assets | 1 Cash - non-interest-bearing | | 1 | |
| | 2 Savings and temporary cash investments | 5,717,637. | 2 | 5,122,242. |
| | 3 Pledges and grants receivable, net | 873,511. | 3 | 787,073. |
| | 4 Accounts receivable, net | | 4 | 3,574. |
| | 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons | | 5 | |
| | 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) | | 6 | |
| | 7 Notes and loans receivable, net | | 7 | |
| | 8 Inventories for sale or use | | 8 | |
| | 9 Prepaid expenses and deferred charges | 38,320. | 9 | 37,537. |
| | 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 276,209. | | |
| | b Less: accumulated depreciation | 251,744. | 10c | 24,465. |
| | 11 Investments - publicly traded securities | 215,822,203. | 11 | 242,562,523. |
| | 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 | 16,185,191. | 15 | 15,900,667. |
| 16 Total assets. Add lines 1 through 15 (must equal line 33) | 238,658,261. | 16 | 264,438,081. | |
| Liabilities | 17 Accounts payable and accrued expenses | 3,192. | 17 | |
| | 18 Grants payable | 4,050,971. | 18 | 2,202,594. |
| | 19 Deferred revenue | | 19 | |
| | 20 Tax-exempt bond liabilities | | 20 | |
| | 21 Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | |
| | 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons | | 22 | |
| | 23 Secured mortgages and notes payable to unrelated third parties | | 23 | |
| | 24 Unsecured notes and loans payable to unrelated third parties | | 24 | |
| | 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D | 12,861,308. | 25 | 13,943,269. |
| | 26 Total liabilities. Add lines 17 through 25 | 16,915,471. | 26 | 16,145,863. |
| Net Assets or Fund Balances | Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33. | | | |
| | 27 Net assets without donor restrictions | 198,744,296. | 27 | 224,905,071. |
| | 28 Net assets with donor restrictions | 22,998,494. | 28 | 23,387,147. |
| | Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33. | | | |
| | 29 Capital stock or trust principal, or current funds | | 29 | |
| | 30 Paid-in or capital surplus, or land, building, or equipment fund | | 30 | |
| | 31 Retained earnings, endowment, accumulated income, or other funds | | 31 | |
| | 32 Total net assets or fund balances | 221,742,790. | 32 | 248,292,218. |
| | 33 Total liabilities and net assets/fund balances | 238,658,261. | 33 | 264,438,081. |

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Part XI Reconciliation of Net Assets

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

| | | | |
|-----------|--|-----------|--------------|
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 34,137,645. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 27,060,689. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | 7,076,956. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | 221,742,790. |
| 5 | Net unrealized gains (losses) on investments | 5 | 19,717,930. |
| 6 | Donated services and use of facilities | 6 | |
| 7 | Investment expenses | 7 | |
| 8 | Prior period adjustments | 8 | |
| 9 | Other changes in net assets or fund balances (explain on Schedule O) | 9 | -245,458. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) | 10 | 248,292,218. |

Part XII Financial Statements and Reporting

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

| | | 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? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | 2a | X |
| b | Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | 2b | X |
| c | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. | 2c | X |
| 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? _____ | 3a | X |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____ | 3b | |

Form **990** (2020)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Name of the organization **THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM**

Employer identification number
63-1209631

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

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

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

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

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

THE COMMUNITY FOUNDATION OF GREATER

Schedule A (Form 990 or 990-EZ) 2020 BIRMINGHAM

63-1209631 Page 2

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) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total |
|--|-----------|-----------|-----------|-----------|-----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 19553538. | 25849101. | 22430319. | 17624095. | 26167948. | 111625001 |
| 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 | 19553538. | 25849101. | 22430319. | 17624095. | 26167948. | 111625001 |
| 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) | | | | | | 21101374. |
| 6 Public support. Subtract line 5 from line 4. | | | | | | 90523627. |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ► | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total |
|---|-----------|-----------|-----------|-----------|-----------|----------------------------|
| 7 Amounts from line 4 | 19553538. | 25849101. | 22430319. | 17624095. | 26167948. | 111625001 |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | 3369094. | 3295457. | 3742155. | 4764473. | 4213368. | 19384547. |
| 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 VI.) | 10,000. | 21,371. | 7,250. | 6,500. | 7,258. | 52,379. |
| 11 Total support. Add lines 7 through 10 | | | | | | 131061927 |
| 12 Gross receipts from related activities, etc. (see instructions) | | | | | 12 | |
| 13 First 5 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 2020 (line 6, column (f), divided by line 11, column (f)) | 14 | 69.07 % |
| 15 Public support percentage from 2019 Schedule A, Part II, line 14 | 15 | 51.45 % |
| 16a 33 1/3% support test - 2020. 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 - 2019. 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 - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization | | ► <input type="checkbox"/> |
| b 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization | | ► <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"/> |

Schedule A (Form 990 or 990-EZ) 2020

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

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

Section A. Public Support

| Calendar year (or fiscal year beginning in) ► | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (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) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| 9 Amounts from line 6 | | | | | | |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | | | | | | |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| c Add lines 10a and 10b | | | | | | |
| 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| 13 Total support. (Add lines 9, 10c, 11, and 12.) | | | | | | |
| 14 First 5 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 2020 (line 8, column (f), divided by line 13, column (f)) | 15 | % |
| 16 Public support percentage from 2019 Schedule A, Part III, line 15 | 16 | % |

Section D. Computation of Investment Income Percentage

| | | |
|--|-----------|---|
| 17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f)) | 17 | % |
| 18 Investment income percentage from 2019 Schedule A, Part III, line 17 | 18 | % |

19a 33 1/3% support tests - 2020. 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 - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

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

THE COMMUNITY FOUNDATION OF GREATER

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

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

| Section A - Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) |
|---------------------------------|--|----------------|-----------------------------|
| 1 | Net short-term capital gain | 1 | |
| 2 | Recoveries of prior-year distributions | 2 | |
| 3 | Other gross income (see instructions) | 3 | |
| 4 | Add lines 1 through 3. | 4 | |
| 5 | Depreciation and depletion | 5 | |
| 6 | Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6 | |
| 7 | Other expenses (see instructions) | 7 | |
| 8 | Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) | 8 | |

| Section B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
|----------------------------------|---|----------------|-----------------------------|
| 1 | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): | | |
| a | Average monthly value of securities | 1a | |
| b | Average monthly cash balances | 1b | |
| c | Fair market value of other non-exempt-use assets | 1c | |
| d | Total (add lines 1a, 1b, and 1c) | 1d | |
| e | Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>): | | |
| 2 | Acquisition indebtedness applicable to non-exempt-use assets | 2 | |
| 3 | Subtract line 2 from line 1d. | 3 | |
| 4 | Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | 4 | |
| 5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | |
| 6 | Multiply line 5 by 0.035. | 6 | |
| 7 | Recoveries of prior-year distributions | 7 | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | |

| Section C - Distributable Amount | | | Current Year |
|----------------------------------|---|---|--------------|
| 1 | Adjusted net income for prior year (from Section A, line 8, column A) | 1 | |
| 2 | Enter 0.85 of line 1. | 2 | |
| 3 | Minimum asset amount for prior year (from Section B, line 8, column A) | 3 | |
| 4 | Enter greater of line 2 or line 3. | 4 | |
| 5 | Income tax imposed in prior year | 5 | |
| 6 | Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). | 6 | |
| 7 | <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). | | |

Schedule A (Form 990 or 990-EZ) 2020

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

| Section D - Distributions | | Current Year |
|--|-----------|---------------------|
| 1 Amounts paid to supported organizations to accomplish exempt purposes | 1 | |
| 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity | 2 | |
| 3 Administrative expenses paid to accomplish exempt purposes of supported organizations | 3 | |
| 4 Amounts paid to acquire exempt-use assets | 4 | |
| 5 Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>) | 5 | |
| 6 Other distributions (<i>describe in Part VI</i>). See instructions. | 6 | |
| 7 Total annual distributions. Add lines 1 through 6. | 7 | |
| 8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions. | 8 | |
| 9 Distributable amount for 2020 from Section C, line 6 | 9 | |
| 10 Line 8 amount divided by line 9 amount | 10 | |

| Section E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions Pre-2020 | (iii) Distributable Amount for 2020 |
|--|-------------------------------------|---|--|
| 1 Distributable amount for 2020 from Section C, line 6 | | | |
| 2 Underdistributions, if any, for years prior to 2020 (reasonable cause required - <i>explain in Part VI</i>). See instructions. | | | |
| 3 Excess distributions carryover, if any, to 2020 | | | |
| a From 2015 | | | |
| b From 2016 | | | |
| c From 2017 | | | |
| d From 2018 | | | |
| e From 2019 | | | |
| f Total of lines 3a through 3e | | | |
| g Applied to underdistributions of prior years | | | |
| h Applied to 2020 distributable amount | | | |
| i Carryover from 2015 not applied (see instructions) | | | |
| j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. | | | |
| 4 Distributions for 2020 from Section D, line 7: \$ | | | |
| a Applied to underdistributions of prior years | | | |
| b Applied to 2020 distributable amount | | | |
| c Remainder. Subtract lines 4a and 4b from line 4. | | | |
| 5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions. | | | |
| 6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions. | | | |
| 7 Excess distributions carryover to 2021. Add lines 3j and 4c. | | | |
| 8 Breakdown of line 7: | | | |
| a Excess from 2016 | | | |
| b Excess from 2017 | | | |
| c Excess from 2018 | | | |
| d Excess from 2019 | | | |
| e Excess from 2020 | | | |

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020 **BIRMINGHAM**

Part VI

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2020

**Open to Public
Inspection**

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

| | |
|---|---|
| Name of organization THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM | Employer identification number 63-1209631 |
|---|---|

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political campaign activity expenditures ▶ \$

3 Volunteer hours for political campaign activities ▶

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527
exempt function activities ▶ \$

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL,
line 17b ▶ \$

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

| (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's funds. If none, enter -0-. | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-. |
|----------|-------------|---------|---|--|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

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

Schedule C (Form 990 or 990-EZ) 2020

LHA

THE COMMUNITY FOUNDATION OF GREATER

Schedule C (Form 990 or 990-EZ) 2020 **BIRMINGHAM**

63-1209631 Page **2**

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

| Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) | | (a) Filing organization's totals | (b) Affiliated group totals | | | | | | | | | | | | |
|--|--|--|-----------------------------|-------------------------------|---|--|---|--|--|---|-------------------|--------------|--|--|--|
| 1a Total lobbying expenditures to influence public opinion (grassroots lobbying) | | 22,738. | | | | | | | | | | | | | |
| b Total lobbying expenditures to influence a legislative body (direct lobbying) | | 0. | | | | | | | | | | | | | |
| c Total lobbying expenditures (add lines 1a and 1b) | | 22,738. | | | | | | | | | | | | | |
| d Other exempt purpose expenditures | | 27,037,951. | | | | | | | | | | | | | |
| e Total exempt purpose expenditures (add lines 1c and 1d) | | 27,060,689. | | | | | | | | | | | | | |
| f Lobbying nontaxable amount. Enter the amount from the following table in both columns. | | 1,000,000. | | | | | | | | | | | | | |
| <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:35%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width:65%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table> | If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is: | Not over \$500,000 | 20% of the amount on line 1e. | Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000. | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000. | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000. | Over \$17,000,000 | \$1,000,000. | | | |
| If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is: | | | | | | | | | | | | | | |
| Not over \$500,000 | 20% of the amount on line 1e. | | | | | | | | | | | | | | |
| Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000. | | | | | | | | | | | | | | |
| Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000. | | | | | | | | | | | | | | |
| Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000. | | | | | | | | | | | | | | |
| Over \$17,000,000 | \$1,000,000. | | | | | | | | | | | | | | |
| g Grassroots nontaxable amount (enter 25% of line 1f) | | 250,000. | | | | | | | | | | | | | |
| h Subtract line 1g from line 1a. If zero or less, enter -0- | | 0. | | | | | | | | | | | | | |
| i Subtract line 1f from line 1c. If zero or less, enter -0- | | 0. | | | | | | | | | | | | | |
| j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | | | | | | | |

4-Year Averaging Period Under Section 501(h)
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
 See the separate instructions for lines 2a through 2f.)

| Lobbying Expenditures During 4-Year Averaging Period | | | | | |
|---|------------|------------|------------|------------|------------|
| Calendar year (or fiscal year beginning in) | (a) 2017 | (b) 2018 | (c) 2019 | (d) 2020 | (e) Total |
| 2a Lobbying nontaxable amount | 1,000,000. | 1,000,000. | 1,000,000. | 1,000,000. | 4,000,000. |
| b Lobbying ceiling amount (150% of line 2a, column(e)) | | | | | 6,000,000. |
| c Total lobbying expenditures | 143,339. | 76,518. | 169,953. | 22,738. | 412,548. |
| d Grassroots nontaxable amount | 250,000. | 250,000. | 250,000. | 250,000. | 1,000,000. |
| e Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | 1,500,000. |
| f Grassroots lobbying expenditures | 67,802. | 60,969. | 93,681. | 22,738. | 245,190. |

Schedule C (Form 990 or 990-EZ) 2020

THE COMMUNITY FOUNDATION OF GREATER

Schedule C (Form 990 or 990-EZ) 2020 BIRMINGHAM

63-1209631 Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

| | (a) | | (b) |
|---|-----|----|--------|
| | Yes | No | Amount |
| 1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: | | | |
| a Volunteers? | | | |
| b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ... | | | |
| c Media advertisements? | | | |
| d Mailings to members, legislators, or the public? | | | |
| e Publications, or published or broadcast statements? | | | |
| f Grants to other organizations for lobbying purposes? | | | |
| g Direct contact with legislators, their staffs, government officials, or a legislative body? | | | |
| h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | | |
| i Other activities? | | | |
| j Total. Add lines 1c through 1i | | | |
| 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | | |
| b If "Yes," enter the amount of any tax incurred under section 4912 | | | |
| c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 | | | |
| d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | |

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

| | Yes | No |
|--|----------|----|
| 1 Were substantially all (90% or more) dues received nondeductible by members? | 1 | |
| 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? | 2 | |
| 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? | 3 | |

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

| | | |
|---|-----------|--|
| 1 Dues, assessments and similar amounts from members | 1 | |
| 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). | | |
| a Current year | 2a | |
| b Carryover from last year | 2b | |
| c Total | 2c | |
| 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | 3 | |
| 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? | 4 | |
| 5 Taxable amount of lobbying and political expenditures (See instructions) | 5 | |

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**
▶ **Attach to Form 990.**▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2020**Open to Public Inspection****Name of the organization** THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM**Employer identification number**
63-1209631**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

| | (a) Donor advised funds | (b) Funds and other accounts |
|---|---|------------------------------|
| 1 Total number at end of year | 277 | 246 |
| 2 Aggregate value of contributions to (during year) | 22,183,353. | 775,342. |
| 3 Aggregate value of grants from (during year) | 16,957,204. | 7,196,104. |
| 4 Aggregate value at end of year | 130,887,972. | 115,606,960. |
| 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? | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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? | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |

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

- 1 Purpose(s) of conservation easements held by the organization (check all that apply).
☐ Preservation of land for public use (for example, recreation or education) ☐ Preservation of a 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 7/25/06, and not on a historic structure listed in the National Register | 2d |
- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶
- 4 Number of states where property subject to conservation easement is located ▶
- 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
- 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶
- 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$
- 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?
- 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

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

| | |
|-----------------|---|
| Part III | Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets <i>(continued)</i> |
|-----------------|---|

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

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

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

| | | |
|--|-----------|--|
| 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, for escrow or custodial account liability? ☐ **Yes** ☐ **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

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

| | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|--|------------------|----------------|--------------------|----------------------|---------------------|
| 1a Beginning of year balance | 116,244,312. | 101,915,828. | 103,585,513. | 93,052,941. | 89,602,601. |
| b Contributions | 2,148,899. | 1,767,383. | 8,473,966. | 5,324,141. | 1,652,774. |
| c Net investment earnings, gains, and losses | 13,332,852. | 16,511,294. | -5,768,028. | 9,986,435. | 5,918,311. |
| d Grants or scholarships | 3,570,594. | 3,162,789. | 3,593,882. | 4,043,906. | 3,337,378. |
| e Other expenditures for facilities and programs | | | | | |
| f Administrative expenses | 950,869. | 787,404. | 781,741. | 734,098. | 783,367. |
| g End of year balance | 127,204,600. | 116,244,312. | 101,915,828. | 103,585,513. | 93,052,941. |

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- | | | | | |
|---|-------------------------------------|---|----------------|---|
| a | Board designated or quasi-endowment | ▶ | <u>84.0000</u> | % |
| b | Permanent endowment | ▶ | <u>14.0000</u> | % |
| c | Term endowment | ▶ | <u>2.0000</u> | % |

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

- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

| | Yes | No |
|--------|-----|----|
| 3a(i) | | X |
| 3a(ii) | | X |
| 3b | | |

- (i) Unrelated organizations
- (ii) Related organizations

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

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

| | |
|----------------|--|
| Part VI | Land, Buildings, and Equipment. |
|----------------|--|

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

| Description of property | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|--|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land | | | | |
| b Buildings | | | | |
| c Leasehold improvements | | | | |
| d Equipment | | 113,072. | 90,360. | 22,712. |
| e Other | | 163,137. | 161,384. | 1,753. |
| Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) | | | | 24,465. |

Schedule D (Form 990) 2020

**THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM**

Schedule D (Form 990) 2020

63-1209631 Page **3**

Part VII Investments - Other Securities.

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

| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|----------------|---|
| (1) Financial derivatives | | |
| (2) Closely held equity interests | | |
| (3) Other | | |
| (A) | | |
| (B) | | |
| (C) | | |
| (D) | | |
| (E) | | |
| (F) | | |
| (G) | | |
| (H) | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶ | | |

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

| (a) Description | (b) Book value |
|---|----------------|
| (1) INTEREST RECEIVABLE | 96,762. |
| (2) RECEIVABLE FROM SPLIT INTERESTS | 2,694,601. |
| (3) INTEREST IN PERPETUAL TRUSTS | 12,929,981. |
| (4) CHARITABLE GIFT ANNUITIES | 179,323. |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶ | 15,900,667. |

Part X Other Liabilities.

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

| 1. (a) Description of liability | (b) Book value |
|---|----------------|
| (1) Federal income taxes | |
| (2) ANNUITY PAYMENT LIABILITY | 33,503. |
| (3) ACCRUED VACATION | 49,287. |
| (4) OTHER LIABILITIES | 185. |
| (5) FUNDS HELD AS AGENCY ENDOWMENTS | 13,860,294. |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ | 13,943,269. |

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

Schedule D (Form 990) 2020

**THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM**

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

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

| | | | |
|----------|--|-----------|-------------|
| 1 | Total revenue, gains, and other support per audited financial statements | 1 | 51,779,480. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | |
| a | Net unrealized gains (losses) on investments | 2a | 18,604,490. |
| b | Donated services and use of facilities | 2b | |
| c | Recoveries of prior year grants | 2c | |
| d | Other (Describe in Part XIII.) | 2d | 875,318. |
| e | Add lines 2a through 2d | 2e | 19,479,808. |
| 3 | Subtract line 2e from line 1 | 3 | 32,299,672. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | |
| b | Other (Describe in Part XIII.) | 4b | 1,837,973. |
| c | Add lines 4a and 4b | 4c | 1,837,973. |
| 5 | Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.) | 5 | 34,137,645. |

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

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

| | | | |
|----------|---|-----------|-------------|
| 1 | Total expenses and losses per audited financial statements | 1 | 25,549,792. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | |
| a | Donated services and use of facilities | 2a | |
| b | Prior year adjustments | 2b | |
| c | Other losses | 2c | |
| d | Other (Describe in Part XIII.) | 2d | 46,417. |
| e | Add lines 2a through 2d | 2e | 46,417. |
| 3 | Subtract line 2e from line 1 | 3 | 25,503,375. |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | |
| b | Other (Describe in Part XIII.) | 4b | 1,557,314. |
| c | Add lines 4a and 4b | 4c | 1,557,314. |
| 5 | Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.) | 5 | 27,060,689. |

Part XIII Supplemental Information.

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

PART V, LINE 4:

ALL ENDOWED FUNDS ARE TO BE USED FOR GRANTMAKING OR COMMUNITY INITIATIVES
IN PERPETUITY.

PART X, LINE 2:

THE FOUNDATION ADHERES TO THE PROVISIONS OF GAAP RELATING TO UNCERTAINTY
IN INCOME TAXES. SUCH PROVISIONS REQUIRE ENTITIES TO ASSESS THEIR
UNCERTAIN TAX POSITIONS FOR THE LIKELIHOOD THAT THEY WOULD BE OVERTURNED
UPON INTERNAL REVENUE SERVICE (IRS) EXAMINATION OR UPON EXAMINATION BY
STATE TAXING AUTHORITIES. IN ACCORDANCE WITH THESE PROVISIONS, THE
FOUNDATION HAS DETERMINED THAT IT DOES NOT HAVE ANY POSITIONS AT DECEMBER
31, 2020, OR 2019, THAT IT WOULD BE UNABLE TO SUBSTANTIATE. THE FOUNDATION

Part XIII Supplemental Information (continued)

HAS FILED ITS TAX RETURNS THROUGH DECEMBER 31, 2019.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

GAIN/(LOSS) ON INTEREST IN PERPETUAL TRUST 875,318.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

REVENUE ON RETURN NOT ON AUDIT RELATED TO AGENCY ENDOWMENT

FUNDS 726,360.

OTHER GAIN/LOSS INCLUDED AS EXPENSE ON AUDIT 794,834.

INCOME REPORTED BY CHARITABLE REAL ESTATE FOUNDATION EIN

20-1560119 316,779.

TOTAL TO SCHEDULE D, PART XI, LINE 4B 1,837,973.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

EXPENSES REPORTED BY CHARITABLE REAL ESTATE FOUNDATION EIN

20-1560119 2,961.

ACTUARIAL GAIN ON ANNUITY OBLIGATION 43,456.

TOTAL TO SCHEDULE D, PART XII, LINE 2D 46,417.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

EXPENSES ON RETURN NOT ON AUDIT RELATED TO AGENCY ENDOWMENT

FUNDS 762,480.

OTHER GAIN/LOSS INCLUDED AS REVENUE ON RETURN 794,834.

TOTAL TO SCHEDULE D, PART XII, LINE 4B 1,557,314.

**SCHEDULE F
(Form 990)**Department of the Treasury
Internal Revenue Service**Statement of Activities Outside the United States**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2020Open to Public
Inspection

Name of the organization

THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM

Employer identification number

63-1209631

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on
Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ **Yes** ☐ **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

| (a) Region | (b) Number of offices in the region | (c) Number of employees, agents, and independent contractors in the region | (d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in the region | (f) Total expenditures for and investments in the region |
|---|-------------------------------------|--|--|--|--|
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| 3 a Subtotal | 0 | 0 | | | 0. |
| b Total from continuation sheets to Part I | 0 | 0 | | | 0. |
| c Totals (add lines 3a and 3b) | 0 | 0 | | | 0. |

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

Schedule F (Form 990) 2020

**THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM**

Schedule F (Form 990) 2020

63-1209631

Page **2**

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

| 1 (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of noncash assistance | (h) Description of noncash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|---|---|-------------------|-----------------------------|---------------------------------|--|---|--|--|
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- 2** Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **▶** _____
- 3** Enter total number of other organizations or entities **▶** _____

Part III can be duplicated if additional space is needed.

Schedule F (Form 990) 2020

THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM

Schedule F (Form 990) 2020

63-1209631 Page 4

Part IV Foreign Forms

- 1** Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☐ Yes ☒ No
- 2** Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* ☐ Yes ☒ No
- 3** Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* ☐ Yes ☒ No
- 4** Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☐ Yes ☒ No
- 5** Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☐ Yes ☒ No
- 6** Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* ☐ Yes ☒ No

Schedule F (Form 990) 2020

| | |
|---------------|---------------------------------|
| Part V | Supplemental Information |
|---------------|---------------------------------|

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

[illegible]

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" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Name of the organization **THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM**

Employer identification number
63-1209631

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

| 1 (a) Name and address of organization or government | (b) EIN | (c) IRC section (if applicable) | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of noncash assistance | (h) Purpose of grant or assistance |
|---|----------------|--|---------------------------------|--|--|--|--|
| CITY OF FAIRFIELD 4701 GARY AVENUE FAIRFIELD, AL 35064 | 63-6001253 | 501(C)(3) | 5,000. | 0. | | | FAIRFIELD COMPLETE COUNT COMMITTEE - CENSUS |
| FIDELITY CHARITABLE P.O. BOX 770001 CINCINNATI, OH 45277-0053 | 11-0303001 | 501(C)(3) | 595,268. | 0. | | | CLOSE OUT OF FUND. |
| JEFFERSON CO 716 RICHARD ARRINGTON JR BLVD N BIRMINGHAM, AL 35203 | 63-6001579 | 501(C)(3) | 15,000. | 0. | | | CENSUS 2020-JEFF CO COMPLETE COUNT COMMITTEE |
| NATHIFA DANCE COMPANY & OUTREACH, INC. - 5277 DRESDEN RD - IRONDALE, AL 35210 | 02-0744398 | 501(C)(3) | 10,000. | 0. | | | GENERAL SUPPORT |
| ST. LUKE'S EPISCOPAL CHURCH 3736 MONTROSE ROAD BIRMINGHAM, AL 35213 | 03-0486902 | CHURCH/SYN | 122,239. | 0. | | | GENERAL SUPPORT + SPECIAL PROGRAMS |
| DANA-FARBER CANCER INSTITUTE PO BOX 849168 BOSTON, MA 02284-9168 | 04-2263040 | 501(C)(3) | 20,000. | 0. | | | GENERAL SUPPORT |

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **445.**
- 3** Enter total number of other organizations listed in the line 1 table **30.**

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

Schedule I (Form 990) 2020

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

**THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM**

Schedule I (Form 990)

63-1209631

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|--|
| WORLD ANIMAL PROTECTION 535 8TH AVE 3RD FLOOR NEW YORK, NY 10018 | 04-2718182 | 501(C)(3) | 6,000. | 0. | | | THE PURPOSE OF THE AUSTRALIAN BUSH FIRE RELIEF |
| PSI UPSILON FOUNDATION 3003 E 96TH STREET INDIANAPOLIS, IN 46240-1357 | 05-6013135 | 501(C)(3) | 40,000. | 0. | | | IN RECOGNITION OF J. MARTIN BRAYBOY'S (GAMMA '84) SERVICE. |
| YALE UNIVERSITY P.O. BOX 1890 NEW HAVEN, CT 06508-1890 | 06-0646973 | 501(C)(3) | 55,300. | 0. | | | GENERAL SUPPORT |
| NUTMEG BIG BROTHERS BIG SISTERS 30 LAUREL ST STE 3 HARTFORD, CT 06106-1362 | 06-0850379 | 501(C)(3) | 5,000. | 0. | | | ON BEHALF OF UNITED PERFORMANCE METALS, AS REQUESTED BY JEFFREY LIESCH |
| ST. MARY'S EPISCOPAL CHURCH 801 THE TRACE JASPER, AL 35504 | 12-1234567 | 501(C)(3) | 20,000. | 0. | | | GENERAL SUPPORT |
| CAMP FIRE USA 120 OXMOOR BLVD STE 110 BIRMINGHAM, AL 35209 | 13-1623921 | 501(C)(3) | 62,333. | 0. | | | GENERAL SUPPORT + SPECIAL PROGRAMS |
| PLANNED PARENTHOOD FEDERATION OF AMERICA - 123 WILLIAM ST10TH FLOOR - NEW YORK, NY 10038-3844 | 13-1644147 | 501(C)(3) | 5,000. | 0. | | | THE PRESIDENT'S CIRCLE |
| AMERICAN CANCER SOCIETY 1100 IRELAND WAY STE 300 BIRMINGHAM, AL 35205-7014 | 13-1788491 | 501(C)(3) | 39,250. | 0. | | | GENERAL SUPPORT |
| DOCTORS WITHOUT BORDERS USA 40 RECTOR ST. 16TH FLOOR NEW YORK, NY 10006 | 13-3433452 | 501(C)(3) | 21,050. | 0. | | | GENERAL SUPPORT |

Schedule I (Form 990)

**THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM**

Schedule I (Form 990)

63-1209631

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|--|
| PRESBYTERIAN CHURCH USA A CORP P.O. BOX 643700 PITTSBURGH, PA 15264-3700 | 13-3462549 | 501(C)(3) | 5,000. | 0. | | | HURRICANE LAURA RELIEF DR000194 |
| TEACH FOR AMERICA-ALABAMA 2301FIRST AVENUE NORTH SUITE 105 BIRMINGHAM, AL 35203 | 13-3541913 | 501(C)(3) | 54,500. | 0. | | | GENERAL SUPPORT |
| STREETSSQUASH, INC. 40 WEST 116TH STREET NEW YORK, NY 10026 | 13-4061809 | 501(C)(3) | 7,500. | 0. | | | THE RITA C. KIMERLING COLLEGE SUPPORT FUND |
| RALEIGH'S PLACE 346 COUNTY ROAD 1028 CLANTON, AL 35046 | 13-4290926 | 501(C)(3) | 25,628. | 0. | | | CLOSE OUT MORRIS SCHOLARSHIP FUND TO A NON-PROFIT. |
| HOLY FAMILY CRISTO REY CATHOLIC HIGH SCHOOL - PO BOX 19577 - HOMWOOD, AL 35219 | 13-4341859 | 501(C)(3) | 300,330. | 0. | | | GENERAL SUPPORT + SPECIAL PROGRAMS |
| AMERICAN HEART ASSOCIATION 217 COUNTRY CLUB PARK PMB 326 BIRMINGHAM, AL 35213 | 13-5613797 | 501(C)(3) | 28,750. | 0. | | | GENERAL SUPPORT |
| LEUKEMIA & LYMPHOMA SOCIETY PO BOX 22324 NEW YORK, NY 10087 | 13-5644916 | 501(C)(3) | 6,500. | 0. | | | THE LIGHT THE NIGHT (HEATH MELTON CAMPAIGN) |
| NATIONAL MULTIPLE SCLEROSIS SOCIETY-ALABAMA-MISSISSIPPI - 2200 WOODCREST PLACE SUITE 230 - BIRMINGHAM, AL 35209 | 13-5661935 | 501(C)(3) | 23,500. | 0. | | | SPECIAL PROGRAMS |
| CORNELL UNIVERSITY PO BOX 752 ITHACA, NY 14851 | 15-0532082 | 501(C)(3) | 31,000. | 0. | | | SPECIAL PROGRAMS |

Schedule I (Form 990)

**THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM**

Schedule I (Form 990)

63-1209631

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|--|
| SHELTERBOX 8374 MARKET ST #203 LAKEWOOD RACH, FL 34202-5137 | 20-0471604 | 501(C)(3) | 24,472. | 0. | | | DISASTER RELIEF AND TEMPORARY HOUSING |
| MUSIC OPPORTUNITY PROGRAM FOUNDATION - 2316 7TH AVE N - BIRMINGHAM, AL 35203 | 20-0703074 | 501(C)(3) | 55,561. | 0. | | | GENERAL SUPPORT |
| REV BIRMINGHAM P.O. BOX 320637 BIRMINGHAM, AL 35232-0637 | 20-0763511 | 501(C)(3) | 116,844. | 0. | | | BIRMINGHAM BUSINESS RELIEF FUND SUPPORT |
| IMPACT AMERICA 601 BEACON PKWY W STE 102 HOMWOOD, AL 35209 | 20-0850212 | 501(C)(3) | 40,000. | 0. | | | SPECIAL PROGRAMS |
| P.E.E.R, INC. 7753 1ST AVE SOUTH BIRMINGHAM, AL 35206 | 20-1029943 | 501(C)(3) | 50,000. | 0. | | | GENERAL SUPPORT |
| MITCHELL'S PLACE 4778 OVERTON ROAD IRONDALE, AL 35210 | 20-1056421 | 501(C)(3) | 23,220. | 0. | | | GENERAL SUPPORT |
| FAITH IN ACTION ALABAMA 2100 4TH AVE N BIRMINGHAM, AL 35203 | 20-1667945 | 501(C)(3) | 95,000. | 0. | | | GENERAL SUPPORT |
| CRIMSON TIDE FOUNDATION PO BOX 870343 TUSCALOOSA, AL 35487-0343 | 20-1715023 | 501(C)(3) | 140,850. | 0. | | | GENERAL SUPPORT |
| MINISTRY CENTER AT GREEN SPRINGS 2230 GREEN SPRINGS HWY BIRMINGHAM, AL 35205 | 20-1877581 | 501(C)(3) | 10,000. | 0. | | | GENERAL SUPPORT |

Schedule I (Form 990)

**THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM**

Schedule I (Form 990)

63-1209631

Page 1

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| CHRIST HEALTH CENTER 5720 1ST AVE SOUTH BIRMINGHAM, AL 35212 | 20-1935552 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| STAIR OF BIRMINGHAM 3703 5TH AVENUE SOUTH SUITE 400 BIRMINGHAM, AL 35222 | 20-3541638 | 501(C)(3) | 44,500. | 0. | | | GENERAL SUPPORT |
| JUPITER ISLAND MEDICAL CLINIC 100 ESTRADA SQUARE HOBE SOUND, FL 33455 | 20-4659155 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| PRESS STREET/ANTENNA 3718 SAINT CLAUDE AVE NEW ORLEANS, LA 70117-5748 | 20-5154240 | 501(C)(3) | 10,000. | 0. | | | GENERAL SUPPORT |
| NEST 501 FIFTH AVENUE, SUITE 1608 NEW YORK, NY 10017 | 20-5450672 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| WOMEN OF MY HOPE, INC. PO BOX 73 MADISONVILLE, LA 70447 | 20-8389117 | 501(C)(3) | 22,200. | 0. | | | GENERAL SUPPORT |
| ALABAMA SPAY NEUTER CLINIC INCORPORATED - 2721 CRESTWOOD BLVD - BIRMINGHAM, AL 35210 | 20-8709714 | 501(C)(3) | 20,000. | 0. | | | GENERAL SUPPORT |
| BOY SCOUTS OF AMERICA-GREATER AL COUNCIL - PO BOX 43307 - BIRMINGHAM, AL 35243-0307 | 22-1576300 | 501(C)(3) | 65,100. | 0. | | | GENERAL SUPPORT |
| UNITED WAY OF LANCASTER COUNTY 1910 HARRINGTON DR STE A LANCASTER, PA 17601 | 23-1352093 | 501(C)(3) | 15,000. | 0. | | | GENERAL SUPPORT |

Schedule I (Form 990)

**THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM**

Schedule I (Form 990)

63-1209631

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|--|
| JUVENILE DIABETES RESEARCH FOUNDATION-AL CHAPTER - 105 WESTPARK DRIVE, SUITE 415 - BRENTWOOD, TN 37027 | 23-1907729 | 501(C)(3) | 49,500. | 0. | | | GENERAL SUPPORT |
| VIRGINIA SAMFORD THEATRE/MAC 1116 26TH STREET SOUTH BIRMINGHAM, AL 35205-2414 | 23-7008513 | 501(C)(3) | 49,160. | 0. | | | GENERAL SUPPORT |
| COMMUNITY FOUNDATION OF PALM BEACH & MARTIN COUNTY - 700 S. DIXIE HWY, SUITE 200 - WEST PALM BEACH, FL 33401 | 23-7181875 | 501(C)(3) | 20,000. | 0. | | | GENERAL SUPPORT |
| OPERA BIRMINGHAM 3601 6TH AVENUE SOUTH BIRMINGHAM, AL 35222 | 23-7207572 | 501(C)(3) | 10,892. | 0. | | | GENERAL SUPPORT |
| BIRMINGHAM CHAMBER MUSIC SOCIETY 3612 OAKDALE ROAD BIRMINGHAM, AL 35223 | 23-7301693 | 501(C)(3) | 35,000. | 0. | | | GENERAL SUPPORT |
| AFFORDABLE COUNSELING THERAPY 200 CENTURY PARK SOUTH SUITE 116 HOOVER, AL 35226 | 23-7302933 | 501(C)(3) | 15,000. | 0. | | | GENERAL SUPPORT |
| BET TZEDEK C/O DEVELOPMENT DEPARTMENT 3250 WILSHIRE BLVD, SUITE #1300 - LOS ANGELES, CA | 23-7304205 | 501(C)(3) | 5,000. | 0. | | | THE RAPID RESPONSE FUND FOR IMMIGRATION RIGHTS |
| BIRMINGHAM MUSEUM OF ART 2000 REV ABRAHAM WOODS JR BLVD BIRMINGHAM, AL 35203 | 23-7335853 | 501(C)(3) | 119,850. | 0. | | | GENERAL SUPPORT + SPECIAL PROGRAMS |
| BIRMINGHAM FESTIVAL THEATRE PO BOX 55321 BIRMINGHAM, AL 35255 | 23-7376092 | 501(C)(3) | 5,300. | 0. | | | BIRMINGHAM BLACK REPERTORY THEATRE - WIG OUT |

Schedule I (Form 990)

**THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM**

Schedule I (Form 990)

63-1209631

Page 1

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|--|
| SYDA FOUNDATION P.O. BOX 600 SOUTH FALLSBURG, NY 12779-0600 | 23-7376445 | 501(C)(3) | 15,000. | 0. | | | GENERAL SUPPORT |
| BIRMINGHAM BOYS CHOIR FOUNDATION 2025 KENTUCKY AVENUE SUITE D BIRMINGHAM, AL 35216 | 23-7378251 | 501(C)(3) | 5,000. | 0. | | | THE CHRISTMAS CONCERT |
| GLENWOOD MENTAL HEALTH SERVICES 150 GLENWOOD LANE BIRMINGHAM, AL 35242-5700 | 23-7396710 | 501(C)(3) | 37,000. | 0. | | | GENERAL SUPPORT |
| BIG OAK RANCH BUSINESS OFFICE 250 JAKE MINTZ RD GADSDEN, AL 35905 | 23-7413017 | 501(C)(3) | 21,809. | 0. | | | GENERAL SUPPORT |
| COMMUNITY INVESTMENT NETWORK 8311 BRIER CREEK PKWY STE 105, BOX RALEIGH, NC 27617 | 26-0238263 | 501(C)(3) | 5,000. | 0. | | | IN SUPPORT OF HOMECOMING, A 2020 VIRTUAL CONFERENCE |
| ADDICTION PREVENTION COALITION 324 COMMONS DR HOMEWOOD, AL 35209 | 26-0319028 | 501(C)(3) | 5,000. | 0. | | | ENSLEY-AREA DIGITAL MARKETING SUBSTANCE ABUSE REDUCTION CAMPAIGN |
| TRIUMPH SERVICES, INC. 2151 HIGHLAND AVENUE SOUTH SUITE 12 BIRMINGHAM, AL 35205 | 26-0508897 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| CHANGED LIVES CHRISTIAN CENTER, INC. - 3049 MASSEY RD #8 - BIRMINGHAM, AL 35216 | 26-0872042 | 501(C)(3) | 18,000. | 0. | | | GENERAL SUPPORT |
| METRO CHANGERS 750 MONTCLAIR ROAD BIRMINGHAM, AL 35213 | 26-1097072 | 501(C)(3) | 50,000. | 0. | | | GENERAL SUPPORT |

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| FRESH AIR FAMILY, INC. P.O. BOX 321038 BIRMINGHAM, AL 35232 | 26-1167804 | 501(C)(3) | 10,500. | 0. | | | GENERAL SUPPORT |
| PROJECT HORSESHOE FARM 1202 MAIN STREET GREENSBORO, AL 36744 | 26-1396439 | 501(C)(3) | 15,000. | 0. | | | GENERAL SUPPORT |
| MILE HIGH 360 P O BOX 40160 DENVER, CO 80204-0160 | 26-1598336 | 501(C)(3) | 7,500. | 0. | | | GENERAL SUPPORT |
| BAMA BULLY RESCUE PO BOX 2123 BIRMINGHAM, AL 35201 | 26-1877188 | 501(C)(3) | 5,000. | 0. | | | BAMA BULLY RESCUE REMY 2020 |
| CAHABA RIVERKEEPER 4650 OLD LOONEY MILL RD BIRMINGHAM, AL 35243 | 26-2623785 | 501(C)(3) | 13,000. | 0. | | | GENERAL SUPPORT |
| WALKER COUNTY COALITION FOR THE HOMELESS - P.O. BOX 1194 - JASPER, AL 35502 | 26-3639673 | 501(C)(3) | 20,000. | 0. | | | GENERAL SUPPORT |
| TRANS UNITED 2425 17TH ST NW APT 104 WASHINGTON, DC 20009 | 26-3728794 | 501(C)(3) | 41,350. | 0. | | | GENERAL SUPPORT |
| ALL NATIONS CHURCH 4411 LLOYD NOLAND PARKWAY FAIRFIELD, AL 35064 | 26-4038254 | 501(C)(3) | 15,000. | 0. | | | GENERAL SUPPORT |
| MOMAKAT RESCUE 2012 KNOLLWOOD PLACE BIRMINGHAM, AL 35242 | 26-4241541 | 501(C)(3) | 5,000. | 0. | | | MOMAKAT RESCUE REMY FUND 2020 |

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| THREE HOTS AND A COT 7353 KIMBERLY AVE BIRMINGHAM, AL 35206 | 26-4355458 | 501(C)(3) | 15,500. | 0. | | | GENERAL SUPPORT |
| BIRMINGHAM EDUCATION FOUNDATION P.O. BOX 55357 BIRMINGHAM, AL 35255 | 26-4685144 | 501(C)(3) | 127,547. | 0. | | | GENERAL SUPPORT |
| GASP 2320 HIGHLAND AVENUE SOUTH SUITE 72 BIRMINGHAM, AL 35205 | 27-0354485 | 501(C)(3) | 10,500. | 0. | | | GENERAL SUPPORT |
| KIKSTART INC. 25 COMMERCE AVE STE 110 HUEYTOWN, AL 35023 | 27-0545619 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| RED MOUNTAIN PARK FOUNDATION 283 LYON LANE BIRMINGHAM, AL 35211 | 27-0950740 | 501(C)(3) | 69,654. | 0. | | | GENERAL SUPPORT |
| COMMUNITY MINISTRY FOR GIRLS, INC. 2628 ACTON DR. BIRMINGHAM, AL 35243 | 27-1427895 | 501(C)(3) | 5,500. | 0. | | | GENERAL SUPPORT |
| BACKYARD BLESSINGS P.O. BOX 129 SUMITON, AL 35148 | 27-1490669 | 501(C)(3) | 30,000. | 0. | | | GENERAL SUPPORT |
| MAIN STREET ALABAMA 880 MONTCLAIR RD STE 245 BIRMINGHAM, AL 35213-2100 | 27-1847357 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| EAST LAKE INITIATIVE 6523 1ST AVE N BIRMINGHAM, AL 35206 | 27-1941412 | 501(C)(3) | 25,000. | 0. | | | GENERAL SUPPORT |

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| WINGS OF HOPE PEDIATRIC FOUNDATION 2437 CHESTNUT RD VESTAVIA HILLS, AL 35216 | 27-2911897 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| VENTURE FOR AMERICA 2988 CHADBOURNE RD. SHAKER HEIGHTS, OH 44120 | 27-2987904 | 501(C)(3) | 10,000. | 0. | | | GENERAL SUPPORT |
| COOSA RIVERKEEPER 102 CROFT ST #B BIRMINGHAM, AL 35242 | 27-3430200 | 501(C)(3) | 17,250. | 0. | | | GENERAL SUPPORT |
| GIRLS ON THE RUN OF BIRMINGHAM PO BOX 530244 BIRMINGHAM, AL 35253 | 27-3439428 | 501(C)(3) | 5,500. | 0. | | | GENERAL SUPPORT |
| CAHABA MEDICAL CARE FOUNDATION 195 HOSPITAL DR CENTREVILLE, AL 35042-2935 | 27-3605364 | 501(C)(3) | 40,000. | 0. | | | GENERAL SUPPORT |
| LIBERTY LEARNING FOUNDATION 3414 GOVERNOR'S DRIVE SW, SUITE 215 HUNTSVILLE, AL 35805 | 27-3790888 | 501(C)(3) | 5,000. | 0. | | | CENSUS 2020 COMPLETE COUNT OUTREACH |
| WOODLAWN FOUNDATION, INC. 5529 1ST AVE S BIRMINGHAM, AL 35212 | 27-4051072 | 501(C)(3) | 163,680. | 0. | | | GENERAL SUPPORT |
| CLERESTORY, INC. 2 PERIMETER PARK SOUTH SUITE 550 E BIRMINGHAM, AL 35243 | 27-4967363 | 501(C)(3) | 15,000. | 0. | | | GENERAL SUPPORT |
| FUSE CORPS 235 MONTGOMERY STREET SUITE 1110 SAN FRANCISCO, CA 94114 | 27-5469219 | 501(C)(3) | 50,000. | 0. | | | GENERAL SUPPORT |

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| GLOBAL GIVING 1110 VERMONT AVE NW STE 550 WASHINGTON, DC 20005 | 30-0108263 | 501(C)(3) | 10,000. | 0. | | | PROJECT #48572 CA FIRE RELIEF FUND |
| NEW AMERICAN PATHWAYS, INC. 2300 HENDERSON MILL RD., NE, SUITE ATLANTA, GA 30345 | 30-0130066 | 501(C)(3) | 30,000. | 0. | | | GENERAL SUPPORT |
| SIGHT SAVERS AMERICA 337 BUSINESS CIRCLE PELHAM, AL 35124 | 30-0188234 | 501(C)(3) | 156,500. | 0. | | | GENERAL SUPPORT+SPECIAL PROGRAMS |
| ALABAMA ARCHIVES & HISTORY FOUNDATION - 624 WASHINGTON AVE PO BOX 300100 - MONTGOMERY, AL 36130-0100 | 30-0407154 | 501(C)(3) | 5,500. | 0. | | | GENERAL SUPPORT |
| ALLIANCE MINISTRIES 2727 19TH PL S BIRMINGHAM, AL 35209 | 30-0447264 | 501(C)(3) | 10,000. | 0. | | | GENERAL SUPPORT |
| BUTLER COUNTY UNITED WAY 323 NORTH 3RD STREET HAMILTON, OH 45011 | 31-0734490 | 501(C)(3) | 16,500. | 0. | | | ON BEHALF OF UNITED PERFORMANCE METALS. |
| PARKINSON ASSOCIATION OF ALABAMA, INC. - P.O. BOX 590146 - BIRMINGHAM, AL 35259 | 31-1467418 | 501(C)(3) | 59,000. | 0. | | | GENERAL SUPPORT+SPECIAL PROGRAMS |
| FAMILY PROMISE OF BIRMINGHAM P.O. BOX 531233 BIRMINGHAM, AL 35253 | 31-1544162 | 501(C)(3) | 16,250. | 0. | | | GENERAL SUPPORT |
| M-POWER MINISTRIES, INC. P.O.BOX 321233 BIRMINGHAM, AL 35232 | 31-1639601 | 501(C)(3) | 23,250. | 0. | | | GENERAL SUPPORT |

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| OHIO WESLEYAN UNIVERSITY 61 SOUTH SANDUSKY STREET DELAWARE, OH 43015 | 31-4379585 | 501(C)(3) | 5,000. | 0. | | | HALF TO GENERAL SUPPORT AND HALF TO MEN'S SOCCER |
| METALS SERVICE CENTER INSTITUTE FOUNDATION - 4201 EUCLID AVE - ROLLING MEADOWS, IL 60008 | 34-1270863 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| SPECIALIZED ALTERNATIVES FOR FAMILIES AND YOUTH OF AMERICA - 3600 7TH COURT SOUTH, SUITE 100 - BIRMINGHAM, AL 35222 | 34-1600251 | 501(C)(3) | 9,650. | 0. | | | GENERAL SUPPORT |
| MAGIC CITY SMOOTH JAZZ, INC. P. O. BOX 611178 BIRMINGHAM, AL 35261 | 35-2271307 | 501(C)(3) | 12,000. | 0. | | | GENERAL SUPPORT |
| PARACLETE MISSION GROUP PO BOX 912576 DENVER, CO 80291-2576 | 36-3559944 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| WEST SUBURBAN COMMUNITY PANTRY 6809 HOBSON VALLEY DRIVE, UNIT 118 WOODRIDGE, IL 60517 | 36-3857072 | 501(C)(3) | 5,000. | 0. | | | ON BEHALF OF LEECO STEEL |
| TAP INC. 209 20TH STREET NORTH SUITE 172 BIRMINGHAM, AL 35203 | 36-4679803 | 501(C)(3) | 20,000. | 0. | | | GENERAL SUPPORT |
| SPANISH PEAKS COMMUNITY FOUNDATION PO BOX 161303 BIG SKY, MT 59716 | 37-1729310 | 501(C)(3) | 10,000. | 0. | | | THE EMERGENCY RELIEF FUND |
| ON THE ROAD LENDING 1500 N. LOOP 12 IRVING, TX 75061 | 38-3910893 | 501(C)(3) | 25,000. | 0. | | | GENERAL SUPPORT |

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| UNIVERSITY OF MICHIGAN 2500 STUDENT ACTIVITIES BLDG 515 E. JEFFERSON ST - ANN ARBOR, MI 48109 | 38-6006309 | 501(C)(3) | 30,000. | 0. | | | THEIR NEEDS BASED SCHOLARSHIP FUND |
| MEDICAL COLLEGE OF WISCONSIN 8701 WATERTOWN PLANK ROAD MILWAUKEE, WI 53226 | 39-0806261 | 501(C)(3) | 10,000. | 0. | | | GENERAL SUPPORT |
| METRO WEST MINISTRIES PO BOX 46 FAIRFIELD, AL 35064 | 41-2098221 | 501(C)(3) | 25,000. | 0. | | | GENERAL SUPPORT |
| UNIVERSITY OF MINNESOTA FOUNDATION MCNAMARA ALUMNI CENTER 200 OAK ST. SE, STE. 500 - MINNEAPOLIS, MN 55455-2010 | 41-6042488 | 501(C)(3) | 25,000. | 0. | | | SCHOLARSHIPS SUPPORT |
| WOMEN'S FUND OF GREATER BIRMINGHAM 2201 5TH AVE SOUTH STE 110 BIRMINGHAM, AL 35233 | 45-0952468 | 501(C)(3) | 180,700. | 0. | | | GENERAL SUPPORT+SPECIAL PROGRAMS |
| MY SISTER'S PLACE, INC PO BOX 1133 CALERA, AL 35040 | 45-2494463 | 501(C)(3) | 25,000. | 0. | | | GENERAL SUPPORT |
| RED BARN FOUNDATION 2700 BAILEY RD LEEDS, AL 35094 | 45-2593191 | 501(C)(3) | 47,525. | 0. | | | GENERAL SUPPORT |
| COMMON THREAD COMMUNITY 174 OXMOOR ROAD BIRMINGHAM, AL 35209 | 45-3731519 | 501(C)(3) | 25,000. | 0. | | | GENERAL SUPPORT |
| COLLEGE ADMISSIONS MADE POSSIBLE 5529 1ST AVENUE SOUTH-SUITE 4 BIRMINGHAM, AL 35212 | 45-3752661 | 501(C)(3) | 45,000. | 0. | | | GENERAL SUPPORT |

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| YOUTH TOWERS 1916 LINDEN DRIVE FORESTDALE, AL 35214 | 45-3913117 | 501(C)(3) | 15,000. | 0. | | | GENERAL SUPPORT |
| BALLARD HOUSE PROJECT 1420 7TH AVENUE NORTH BIRMINGHAM, AL 35203 | 45-3971768 | 501(C)(3) | 55,000. | 0. | | | CAPITAL CAMPAIGN |
| MCGILL-TOOLEN FOUNDATION, INC. 1501 OLD SHELL ROAD MOBILE, AL 36604 | 46-0643590 | CHURCH/SYNAGOGUE | 5,500. | 0. | | | THE FUND FOR MCGILL-TOOLEN CATHOLIC |
| CENTRAL SIX DEVELOPMENT COUNCIL 3500 6TH AVE S, SUITE 106 BIRMINGHAM, AL 35222 | 46-2680335 | 501(C)(3) | 45,000. | 0. | | | GENERAL SUPPORT |
| WORKFAITH BIRMINGHAM 1449 MEDICAL PARK DR. BIRMINGHAM, AL 35213 | 46-3606843 | 501(C)(3) | 21,000. | 0. | | | GENERAL SUPPORT |
| PINKTOPPS, INC. 1931-A 3RD AVE. NORTH BESSEMER, AL 35020 | 46-3842353 | 501(C)(3) | 8,000. | 0. | | | GENERAL SUPPORT |
| PRESCHOOL PARTNERS FOUNDATION 4447 MONTEVALLO ROAD BIRMINGHAM, AL 35213 | 46-4519557 | 501(C)(3) | 13,000. | 0. | | | GENERAL SUPPORT |
| ALABAMA SMALL BUSINESS DEVELOPMENT INITIATIVE - 1500 1ST AVE N, #12 - BIRMINGHAM, AL 35203 | 46-5559627 | 501(C)(3) | 1,146,500. | 0. | | | BIRMINGHAM STRONG SUPPORT FOR SMALL BUSINESSES |
| ADELANTE ALABAMA WORKER CENTER 2104 CHAPEL HILL ROAD BIRMINGHAM, AL 35216 | 46-5635459 | 501(C)(3) | 25,000. | 0. | | | GENERAL SUPPORT |

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| MOTHERS' MILK BANK OF ALABAMA 107 WALTER DAVIS DR BIRMINGHAM, AL 35209 | 46-5762888 | 501(C)(3) | 19,000. | 0. | | | GENERAL SUPPORT |
| NICK'S KIDS FOUNDATION 1130 UNIVERSITY BLVD SUITE B9-201 TUSCALOOSA, AL 35401 | 47-1540447 | 501(C)(3) | 6,000. | 0. | | | GENERAL SUPPORT |
| BIB & TUCKER SEW-OP 4915-B 5TH AVE SOUTH BIRMINGHAM, AL 35222 | 47-1830775 | 501(C)(3) | 91,100. | 0. | | | GENERAL SUPPORT |
| SCALAWAG 318 BLACKWELL ST. DURHAM, NC 27701 | 47-2014247 | 501(C)(3) | 25,000. | 0. | | | GENERAL SUPPORT |
| UNLESS U 2017 COLUMBIANA RD. VESTAVIA HILLS, AL 35216 | 47-2035114 | 501(C)(3) | 5,000. | 0. | | | THE CAPITAL CAMPAIGN |
| 826 NEW ORLEANS 1750 ST. BERNARD AVENUE NEW ORLEANS, LA 70116 | 47-2743923 | 501(C)(3) | 20,000. | 0. | | | GENERAL SUPPORT |
| ROOTED MINISTRY PO BOX 43673 BIRMINGHAM, AL 35243 | 47-2866075 | 501(C)(3) | 18,500. | 0. | | | GENERAL SUPPORT |
| ROOM IN THE INN SHOALS PO BOX 411-2202 CHISOLM ROAD FLORENCE, AL 35630 | 47-2883572 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| EAST LAKE ACADEMY INC PO BOX 590049 BIRMINGHAM, AL 35259 | 47-2976837 | 501(C)(3) | 13,450. | 0. | | | GENERAL SUPPORT |

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| HOOVER HELPS 1658 LAKE CYRUS CLUB DR BIRMINGHAM, AL 35244 | 47-3021505 | 501(C)(3) | 10,000. | 0. | | | GENERAL SUPPORT |
| ALABAMA INITIATIVE FOR INDEPENDENT JOURNALISM - 147 GLENVIEW DRIVE - BIRMINGHAM, AL 35213 | 47-3524117 | 501(C)(3) | 34,550. | 0. | | | GENERAL SUPPORT |
| THE INSTITUTE FOR COMMUNITY, YOUTH & FAMILY SERVICES, INC. - 600 20TH STREET NORTH SUITE 304 - BIRMINGHAM, AL 35203 | 47-3540933 | 501(C)(3) | 10,000. | 0. | | | GENERAL SUPPORT |
| ALABAMA COALITION FOR IMMIGRANT JUSTICE UNITED - 1826 6TH AVE S - BIRMINGHAM, AL 35210 | 47-4352872 | 501(C)(3) | 25,000. | 0. | | | GENERAL SUPPORT |
| ONE PLACE METRO ALABAMA FAMILY JUSTICE CENTER - P.O. BOX 59812 - BIRMINGHAM, AL 35259 | 47-4673750 | 501(C)(3) | 20,000. | 0. | | | GENERAL SUPPORT |
| A4ONE 174 OXMOOR ROAD BIRMINGHAM, AL 35209 | 47-4908523 | 501(C)(3) | 6,000. | 0. | | | GENERAL SUPPORT |
| STREAM INNOVATIONS 209 20TH ST NORTH STE 138 BIRMINGHAM, AL 35203 | 47-5353313 | 501(C)(3) | 15,000. | 0. | | | GENERAL SUPPORT |
| MASON MUSIC FOUNDATION 4129 N CAHABA DR VESTAVIA, AL 35243-5006 | 47-5443760 | 501(C)(3) | 20,000. | 0. | | | THE WOODLAWN RENOVATION+GENERAL SUPPORT |
| ALABAMA GIVING P O BOX 530727 BIRMINGHAM, AL 35253-0727 | 48-1266328 | 501(C)(3) | 5,000. | 0. | | | 2020 MEMBERSHIP AND SUPPORT |

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| UAB WOMEN'S CLUB 1720 2ND AVE SOUTH STE 1230 BIRMINGHAM, AL 35294 | 51-0185990 | 501(C)(3) | 5,780. | 0. | | | FOR UAB WOMEN'S CLUB SCHOLARSHIP FUND TO BE USED FOR SCHOLARSHIPS BENEFITTING YOUNG WOMEN |
| ALABAMA KIDNEY FOUNDATION 265 RIVERCHASE PKWY E STE 106 BIRMINGHAM, AL 35244 | 51-0189641 | 501(C)(3) | 8,500. | 0. | | | GENERAL SUPPORT + SPECIAL PROGRAMS |
| ALABAMA SCHOOL OF FINE ARTS FOUNDATION - 1800 8TH AVE NORTH - BIRMINGHAM, AL 35203 | 51-0196130 | 501(C)(3) | 10,000. | 0. | | | DJD |
| ADVENTIST COMMUNITY SERVICES, EPHEsus - 105 6TH AVENUE NORTH - BIRMINGHAM, AL 35204 | 52-0643036 | 501(C)(3) | 15,500. | 0. | | | GENERAL SUPPORT |
| NEW LIFE PANTRY P.O. BOX 5472 5626 ASH STREET BIRMINGHAM, AL 35207 | 52-0643036 | 501(C)(3) | 15,000. | 0. | | | GENERAL SUPPORT |
| COMMUNITY WEALTH PARTNERS 1825 K STREET NW SUITE 1000 WASHINGTON, DC 20006 | 52-1367538 | 501(C)(3) | 5,000. | 0. | | | FOSTERING NEW CONNECTIONS COHORT |
| SOUTHERN ENVIRONMENTAL LAW CENTER BIRMINGHAM OFFICE - 2829 SECOND AVE S #282 - BIRMINGHAM, AL 35233 | 52-1436778 | 501(C)(3) | 13,750. | 0. | | | GENERAL SUPPORT |
| WORLD WILDLIFE FUND 1250 24TH ST NW WASHINGTON, DC 20037 | 52-1693387 | 501(C)(3) | 6,500. | 0. | | | GENERAL SUPPORT |
| GREATER SHILOH MISSIONARY BAPTIST CHURCH - 2135 JEFFERSON AVE SW - BIRMINGHAM, AL 35211 | 52-2214097 | 501(C)(3) | 12,000. | 0. | | | GENERAL SUPPORT |

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| JONES VALLEY TEACHING FARM 701 25TH STREET NORTH BIRMINGHAM, AL 35203 | 52-2359003 | 501(C)(3) | 225,000. | 0. | | | GENERAL SUPPORT + SPECIAL PROGRAMS |
| BROOKINGS INSTITUTION 1775 MASSACHUSETTS AVE NW WASHINGTON, DC 20036 | 53-0196577 | 501(C)(3) | 100,000. | 0. | | | PROSPER BIRMINGHAM DESIGN AND IMPLEMENTATION |
| GEORGETOWN UNIVERSITY G-19 HEALY HALL, BOX 571252 3700 0 WASHINGTON, DC 20057 | 53-0196603 | 501(C)(3) | 5,000. | 0. | | | AWARD FOR EXCELLENCE |
| AMERICAN RED CROSS NATIONAL HEADQUARTERS - 431 18TH ST NW - WASHINGTON, DC 20006-5310 | 53-0196605 | 501(C)(3) | 41,951. | 0. | | | GENERAL SUPPORT + SPECIAL PROGRAMS |
| JEWISH FEDERATION OF GREATER WASHINGTON - 6101 EXECUTIVE BLVD STE 100 - N BETHESDA, MD 20852-3913 | 53-0212445 | 501(C)(3) | 12,700. | 0. | | | GENERAL SUPPORT |
| AMERICAN ENTERPRISE INSTITUTE FOR PUBLIC POLICY RESEARCH - 1789 MASSACHUSETTS AVENUE NW - WASHINGTON, DC 20036 | 53-0218495 | 501(C)(3) | 11,250. | 0. | | | GENERAL SUPPORT |
| NATURE CONSERVANCY OF ALABAMA 601 NORTH UNIVERSITY AVE LITTLE ROCK, AR 72205 | 53-0242652 | 501(C)(3) | 25,165. | 0. | | | GENERAL SUPPORT |
| UNIVERSITY OF VIRGINIA ALUMNI ASSOCIATION - P.O. BOX 400314 - CHARLOTTESVILLE, VA 22904 | 54-0485595 | 501(C)(3) | 20,000. | 0. | | | THE ANDREW SELFRIDGE BIRMINGHAM BICENTENNIAL SCHOLARSHIP FUND |
| CHATHAM HALL 800 CHATHAM HALL CIRCLE CHATHAM, VA 24531-3085 | 54-0505878 | 501(C)(3) | 50,000. | 0. | | | GENERAL SUPPORT |

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|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|---|
| RANDOLPH COLLEGE RANDOLPH COLLEGE OFFICE OF INSTITUTIONAL ADVANCEMENT P.O. BOX 3215 - LYNCHBU | 54-0505941 | 501(C)(3) | 10,711. | 0. | | | GENERAL SUPPORT |
| WASHINGTON AND LEE UNIVERSITY ANNUAL FUND OFFICE 204 W. WASHINGTON ST. - LEXINGTON, VA 24450-0303 | 54-0505977 | 501(C)(3) | 21,000. | 0. | | | GENERAL SUPPORT |
| SWEET BRIAR COLLEGE PO BOX 1057 SWEET BRIAR, VA 24595 | 54-0534105 | 501(C)(3) | 18,750. | 0. | | | GENERAL SUPPORT |
| SOCIETY OF ST. ANDREW-ALABAMA P.O. BOX 610806 BIRMINGHAM, AL 35261 | 54-1285793 | 501(C)(3) | 20,000. | 0. | | | GENERAL SUPPORT |
| CHRISTIAN AFRICAN LEADERSHIP MINISTRIES - 2017 6TH AVE. N. - BIRMINGHAM, AL 35203 | 54-1608407 | 501(C)(3) | 50,000. | 0. | | | GENERAL SUPPORT |
| COLLEGE FOUNDATION OF THE UNIVERSITY OF VIRGINIA - ARTS AND SCIENCE DEPT P.O. BOX 400801 - CHARLOTTESVILLE, VA 22904 | 54-2009312 | 501(C)(3) | 20,000. | 0. | | | GENERAL SUPPORT |
| UNIVERSITY OF VIRGINIA P.O. BOX 400807 CHARLOTTESVILLE, VA 22904-4807 | 54-6001796 | 501(C)(3) | 255,500. | 0. | | | GENERAL SUPPORT+SPECIAL PROGRAMS |
| WAKE FOREST UNIVERSITY C/O MARY M. EVANS PO BOX 7227 WINSTON-SALEM, NC 27109 | 56-0532138 | 501(C)(3) | 10,000. | 0. | | | 50% GENERAL FUND AND 50% CASA ARTOM |
| LAKE JUNALUSKA ASSEMBLY INC P.O.BOX 67 LAKE JUNALUSKA, NC 28745 | 56-0547461 | 501(C)(3) | 100,000. | 0. | | | FUNDS TO BE USED FOR CARE AND MAINTENANCE OF THE LAKE, LAKESHORE, BRIDGE, DAM, INCLUDING DREDGING, |

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| CHURCH OF THE INCARNATION PO BOX 729 HIGHLANDS, NC 28741 | 56-0552779 | 501(C)(3) | 6,000. | 0. | | | GENERAL SUPPORT |
| CAROLINA UNIVERSITY 420 S BROAD STREET WINSTON-SALEM, NC 27101 | 56-0594591 | 501(C)(3) | 6,801. | 0. | | | TO SUPPORT THE BIRMINGHAM, AL AREA. |
| COMMUNITY FOUNDATION OF WESTERN NC 4 VANDERBILT PARK DRIVE ASHEVILLE, NC 28803 | 56-1223384 | 501(C)(3) | 7,500. | 0. | | | GENERAL SUPPORT |
| HIGHLAND-CASHIERS CHAMBER MUSIC FESTIVAL - PO BOX 1702 - HIGHLANDS, NC 28741 | 56-1376891 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| MARTIN LIPSCOMB PERFORMING ARTS CENTER - PO BOX 296 507 CHESTNUT ST - HIGHLANDS, NC 28741 | 56-2155282 | 501(C)(3) | 1,000,000. | 0. | | | MATCHING FUNDS FOR NEW FACILITY. SHOULD CONSTRUCTION OF A NEW FACILITY NOT BEGIN WITHIN |
| ALABAMA SUSTAINABLE AGRICULTURE NETWORK - PO BOX 2533 - BIRMINGHAM, AL 35233 | 56-2461946 | 501(C)(3) | 25,000. | 0. | | | GENERAL SUPPORT |
| UNIVERSITY OF NORTH CAROLINA PO BOX 2446 CHAPEL HILL, NC 27515 | 56-6001393 | 501(C)(3) | 15,300. | 0. | | | GENERAL SUPPORT |
| WOFFORD COLLEGE 429 NORTH CHURCH STREET SPARTANBURG, SC 29303 | 57-0314422 | 501(C)(3) | 5,000. | 0. | | | SUPPORT OF THE BETWEEN THE TOLLS SCHOLARSHIP FUND |
| ALABAMA ANIMAL ADOPTION SOCIETY 2808 CRESCENT AVENUE BIRMINGHAM, AL 35209 | 57-0656655 | 501(C)(3) | 5,693. | 0. | | | ANONYMOUS-GENERAL SUPPORT |

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| SPACE ONE ELEVEN 2409 2ND AVE NORTH BIRMINGHAM, AL 35203-3809 | 57-0890249 | 501(C)(3) | 90,825. | 0. | | | GENERAL SUPPORT |
| CHILDREN'S HARBOR 1 OUR CHILDREN'S HIGHWAY ALEXANDER CITY, AL 35010-8620 | 57-0892070 | 501(C)(3) | 58,100. | 0. | | | GENERAL SUPPORT |
| GRACE HOUSE MINISTRIES P.O. BOX 547 FAIRFIELD, AL 35064 | 57-0903169 | 501(C)(3) | 35,500. | 0. | | | GENERAL SUPPORT |
| SALVATION ARMY PO BOX 11005 BIRMINGHAM, AL 35202 | 58-0660607 | 501(C)(3) | 486,958. | 0. | | | GENERAL SUPPORT+SPECIAL PROGRAMS |
| AIDS ALABAMA 3529 7TH AVE S BIRMINGHAM, AL 35222-3210 | 58-1727755 | 501(C)(3) | 35,750. | 0. | | | SPECIAL PROGRAMS |
| NASHVILLE SHAKESPEARE FESTIVAL 161 RAINS AVENUE NASHVILLE, TN 37203 | 58-1807951 | 501(C)(3) | 6,000. | 0. | | | GENERAL SUPPORT |
| 21ST CENTURY LEADERS PO BOX 1125 DECATUR, GA 30031 | 58-1820875 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| BIRMINGHAM CIVIL RIGHTS INSTITUTE 520 16TH STREET NORTH BIRMINGHAM, AL 35203 | 58-1892067 | 501(C)(3) | 103,000. | 0. | | | GENERAL SUPPORT |
| BRIDGE MINISTRIES P.O. BOX 55216 BIRMINGHAM, AL 35255 | 58-1927997 | 501(C)(3) | 23,000. | 0. | | | GENERAL SUPPORT |

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| MCWANE SCIENCE CENTER 200 19TH STREET NORTH BIRMINGHAM, AL 35203 | 58-1933712 | 501(C)(3) | 82,750. | 0. | | | GENERAL SUPPORT |
| FRIENDS OF CATS AND DOGS FOUNDATION - P.O. BOX 130398 - BIRMINGHAM, AL 35213 | 58-1951231 | 501(C)(3) | 18,120. | 0. | | | GENERAL SUPPORT |
| CHILDREN'S ADVOCACY CENTER 5705 UPTON ROAD, SUITE C CHATTANOOGA, TN 37411 | 58-1953669 | 501(C)(3) | 35,000. | 0. | | | IN HONOR OF KATIE WARREN |
| RED MOUNTAIN THEATRE COMPANY P.O. BOX 278 BIRMINGHAM, AL 35201 | 58-1994417 | 501(C)(3) | 233,655. | 0. | | | GENERAL SUPPORT+SPECIAL PROGRAMS |
| FRIENDS OF RICKWOOD P.O. BOX 12583 BIRMINGHAM, AL 35202 | 58-2046326 | 501(C)(3) | 10,000. | 0. | | | GENERAL SUPPORT |
| MANNA MINISTRIES P.O. BOX 1789 ALABASTER, AL 35007 | 58-2058855 | 501(C)(3) | 12,000. | 0. | | | GENERAL SUPPORT |
| MAGIC CITY HARVEST P.O. BOX 11292 BIRMINGHAM, AL 35202-1292 | 58-2060122 | 501(C)(3) | 7,700. | 0. | | | GENERAL SUPPORT |
| TEMPLE EMANU-EL 2100 HIGHLAND AVENUE BIRMINGHAM, AL 35205 | 58-2065803 | 501(C)(3) | 15,200. | 0. | | | GENERAL SUPPORT+SPECIAL PROGRAMS |
| SOCIETY OF INTERNATIONAL FELLOWS/GLOBAL NETWORK FOUNDATION, INC. - 715 PEACHTREE STREET, SUITE 200 - ATLANTA, GA 30308 | 58-2069383 | 501(C)(3) | 27,325. | 0. | | | GENERAL SUPPORT |

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| ALABAMA POSSIBLE PO BOX 55058 BIRMINGHAM, AL 35255 | 58-2074080 | 501(C)(3) | 29,000. | 0. | | | GENERAL SUPPORT |
| MOUNTAIN BROOK LIBRARY FOUNDATION 50 OAK STREET BIRMINGHAM, AL 35213 | 58-2094979 | 501(C)(3) | 33,763. | 0. | | | GENERAL SUPPORT+SPECIAL PROGRAMS |
| JEFFERSON CO. SCHOOLS PUBLIC EDUCATION FND - 2100 RICHARD ARRINGTON JR BLVD S - BIRMINGHAM, AL 35209-1891 | 58-2099274 | 501(C)(3) | 15,000. | 0. | | | GENERAL SUPPORT |
| IMPACT FAMILY COUNSELING 1000 24TH STREET SOUTH BIRMINGHAM, AL 35205 | 58-2112829 | 501(C)(3) | 20,000. | 0. | | | GENERAL SUPPORT |
| PLANNED PARENTHOOD SOUTHEAST, INC. 241 PEACHTREE STREET NE, SUITE 400 ATLANTA, GA 30303 | 58-6045874 | 501(C)(3) | 10,825. | 0. | | | GENERAL SUPPORT |
| CHURCH OF THE REDEEMER 222 S PALM AVE SARASOTA, FL 34236 | 59-0751911 | 501(C)(3) | 17,000. | 0. | | | THE CAPITAL CAMPAIGN |
| CHRIST MEMORIAL CHAPEL P.O. BOX 582 HOBE SOUND, FL 33475 | 59-0882964 | 501(C)(3) | 12,000. | 0. | | | GENERAL SUPPORT |
| INTER-FAITH COUNCIL FOR SOCIAL SERVICE - 100 W. ROSEMARY ST. - CHAPEL HILL, NC 27516 | 59-1224041 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| HOBE SOUND COMMUNITY CHEST P.O. BOX 511 HOBE SOUND, FL 33475-0511 | 59-6155092 | 501(C)(3) | 6,000. | 0. | | | GENERAL SUPPORT |

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| SAINT JOESPH CATHOLIC CHURCH 140 W GOVERNMENT ST PENSACOLA, FL 32502 | 59-6586125 | 501(C)(3) | 30,000. | 0. | | | BUILDING FUND 85-801273 9668-69 IN HONOR OF ROGER GUILLAUME |
| BAYLOR SCHOOL 171 BAYLOR SCHOOL ROAD CHATTANOOGA, TN 37405 | 62-0126365 | 501(C)(3) | 35,000. | 0. | | | GENERAL SUPPORT |
| UNIVERSITY OF THE SOUTH 735 UNIVERSITY AVENUE SEWANEE, TN 37383-1000 | 62-0475697 | 501(C)(3) | 8,500. | 0. | | | GENERAL SUPPORT |
| MCCALLIE SCHOOL, INC. 500 DODDS AVE CHATTANOOGA, TN 37404 | 62-0475837 | 501(C)(3) | 8,000. | 0. | | | GENERAL SUPPORT |
| WEST END SYNAGOGUE 3810 WEST END AVENUE NASHVILLE, TN 37205 | 62-0513743 | 501(C)(3) | 100,000. | 0. | | | GENERAL SUPPORT |
| UNITED WAY OF GREATER NASHVILLE 250 VENTURE CIR NASHVILLE, TN 37228 | 62-0533104 | 501(C)(3) | 15,000. | 0. | | | GENERAL SUPPORT |
| ST. JUDE CHILDREN'S RESEARCH HOSPITAL - 501 ST JUDE PLACE - MEMPHIS, TN 38105 | 62-0646012 | 501(C)(3) | 6,500. | 0. | | | GENERAL SUPPORT+SPECIAL PROGRAMS |
| BIRMINGHAM ZOO, INC 2630 CAHABA ROAD BIRMINGHAM, AL 35223 | 62-1231591 | 501(C)(3) | 116,750. | 0. | | | GENERAL SUPPORT |
| UNIVERSITY OF TENNESSEE FOUNDATION 1525 UNIVERSITY AVENUE ROOM 223 KNOXVILLE, TN 37921-4848 | 62-1844686 | 501(C)(3) | 18,000. | 0. | | | SPECIAL PROGRAMS |

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| UNIVERSITY OF TENNESSEE-CHATTANOOGA - 101 FOUNDERS HALL, DEPT. 5605 615 MCCALLIE AVE. - CHATTANOOGA, TN | 62-6001636 | SCHOOL/COL | 5,000. | 0. | | | SCHOLARSHIPS SUPPORT |
| HIGHLANDS UNITED METHODIST CHURCH 1045 20TH STREET SOUTH BIRMINGHAM, AL 35205 | 63-0288340 | CHURCH/SYN | 42,000. | 0. | | | GENERAL SUPPORT+SPECIAL PROGRAMS |
| GREATER BIRMINGHAM HUMANE SOCIETY 300 SNOW DRIVE BIRMINGHAM, AL 35209 | 63-0288810 | 501(C)(3) | 20,293. | 0. | | | GENERAL SUPPORT |
| BIRMINGHAM SOUTHERN COLLEGE BOX 549003 BIRMINGHAM, AL 35254 | 63-0288811 | 501(C)(3) | 292,793. | 0. | | | GENERAL SUPPORT |
| CHILDREN'S AID SOCIETY 2141 14TH AVENUE SOUTH BIRMINGHAM, AL 35205 | 63-0288823 | 501(C)(3) | 9,650. | 0. | | | GENERAL SUPPORT |
| CATHEDRAL CHURCH OF THE ADVENT 2017 6TH AVE NORTH BIRMINGHAM, AL 35203 | 63-0288824 | 501(C)(3) | 247,126. | 0. | | | GENERAL SUPPORT+SPECIAL PROGRAMS |
| FIRST UNITED METHODIST CHURCH 518 19TH STREET NORTH BIRMINGHAM, AL 35203 | 63-0288831 | CHURCH/SYN | 17,238. | 0. | | | GENERAL SUPPORT |
| FIRST PRESBYTERIAN CHURCH 2100 4TH AVE N BIRMINGHAM, AL 35203 | 63-0288833 | CHURCH/SYN | 25,000. | 0. | | | GENERAL SUPPORT |
| HUNTINGDON COLLEGE 1500 EAST FAIRVIEW AVENUE MONTGOMERY, AL 36106 | 63-0288841 | 501(C)(3) | 15,500. | 0. | | | GENERAL SUPPORT |

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| INDEPENDENT PRESBYTERIAN CHURCH 3100 HIGHLAND AVENUE BIRMINGHAM, AL 35205 | 63-0288843 | CHURCH/SYN | 100,776. | 0. | | | GENERAL SUPPORT+SPECIAL PROGRAMS |
| UNITED WAY OF CENTRAL ALABAMA P.O. BOX 320189 BIRMINGHAM, AL 35232-0189 | 63-0288846 | 501(C)(3) | 1,383,544. | 0. | | | GENERAL SUPPORT+SPECIAL PROGRAMS |
| LAKESHORE FOUNDATION 4000 RIDGEWAY DRIVE BIRMINGHAM, AL 35209 | 63-0288847 | 501(C)(3) | 80,000. | 0. | | | GENERAL SUPPORT |
| LEVITE JEWISH COMMUNITY CENTER 3960 MONTCLAIR ROAD BIRMINGHAM, AL 35213 | 63-0288848 | 501(C)(3) | 13,600. | 0. | | | GENERAL SUPPORT |
| GATEWAY 1401 20TH STREET SOUTH BIRMINGHAM, AL 35205 | 63-0288854 | 501(C)(3) | 31,500. | 0. | | | GENERAL SUPPORT |
| EPISCOPAL CHURCH IN THE DIOCESE OF ALABAMA - 521 NORTH 20TH STREET - BIRMINGHAM, AL 35203 | 63-0288860 | 501(C)(3) | 17,700. | 0. | | | GENERAL SUPPORT+SPECIAL PROGRAMS |
| SOUTHERN RESEARCH INSTITUTE P.O. BOX 55305 BIRMINGHAM, AL 35255 | 63-0288868 | 501(C)(3) | 50,000. | 0. | | | GENERAL SUPPORT |
| QUARTERBACKING CHILDREN'S HEALTH FOUNDATION - 2019 4TH AVE N STE 101 - BIRMINGHAM, AL 35203 | 63-0288872 | 501(C)(3) | 18,950. | 0. | | | GENERAL SUPPORT |
| YWCA 309 NORTH 23RD STREET BIRMINGHAM, AL 35203 | 63-0288882 | 501(C)(3) | 143,650. | 0. | | | GENERAL SUPPORT+SPECIAL PROGRAMS |

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| YMCA BIRMINGHAM 2101 FOURTH AVE NORTH BIRMINGHAM, AL 35203 | 63-0299894 | 501(C)(3) | 116,050. | 0. | | | GENERAL SUPPORT+SPECIAL PROGRAMS |
| BOYS & GIRLS CLUBS OF CENTRAL ALABAMA - P.O. BOX 10391 - BIRMINGHAM, AL 35202 | 63-0302102 | 501(C)(3) | 57,500. | 0. | | | GENERAL SUPPORT |
| THE ALTAMONT SCHOOL P.O. BOX 131429 BIRMINGHAM, AL 35213 | 63-0302110 | 501(C)(3) | 63,868. | 0. | | | GENERAL SUPPORT+SPECIAL PROGRAMS |
| ST. ANDREW'S EPISCOPAL CHURCH 1024 12TH STREET SOUTH BIRMINGHAM, AL 35205 | 63-0302156 | CHURCH/SYN | 10,000. | 0. | | | GENERAL SUPPORT |
| ST. MARY'S ON THE HIGHLANDS EPISCOPAL CHURCH - 1910 12TH AVENUE SOUTH - BIRMINGHAM, AL 35205 | 63-0302166 | CHURCH/SYN | 259,500. | 0. | | | GENERAL SUPPORT |
| TRINITY UNITED METHODIST CHURCH 1400 OXMOOR ROAD BIRMINGHAM, AL 35209 | 63-0302180 | CHURCH/SYN | 27,583. | 0. | | | GENERAL SUPPORT |
| WILMER HALL CHILDREN'S HOME 3811 OLD SHELL ROAD MOBILE, AL 36608-1396 | 63-0302184 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| CHILDREN'S OF ALABAMA 1600 7TH AVE SOUTH BIRMINGHAM, AL 35233 | 63-0307306 | 501(C)(3) | 97,000. | 0. | | | GENERAL SUPPORT |
| PRESBYTERIAN HOME FOR CHILDREN/FAMILY BRIDGES - P.O. DRAWER 577 - TALLADEGA, AL 35161 | 63-0307953 | 501(C)(3) | 7,500. | 0. | | | GENERAL SUPPORT |

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| UNITED ABILITY 100 OSLO CIRCLE BIRMINGHAM, AL 35211 | 63-0307960 | 501(C)(3) | 18,500. | 0. | | | GENERAL SUPPORT+SPECIAL PROGRAMS |
| SAMFORD UNIVERSITY UNIVERSITY ADVANCEMENT 800 LAKESHORE DRIVE - BIRMINGHAM, AL 35229 | 63-0312914 | 501(C)(3) | 47,118. | 0. | | | GENERAL SUPPORT+SPECIAL PROGRAMS |
| INDIAN SPRINGS SCHOOL 190 WOODWARD DRIVE INDIAN SPRINGS, AL 35124 | 63-0319832 | 501(C)(3) | 12,848. | 0. | | | GENERAL SUPPORT |
| WORKSHOPS, INC. 4244 3RD AVENUE SOUTH BIRMINGHAM, AL 35222 | 63-0320201 | 501(C)(3) | 21,000. | 0. | | | GENERAL SUPPORT |
| BROTHER BRYAN'S MISSION P.O. BOX 11254 BIRMINGHAM, AL 35202 | 63-0322672 | 501(C)(3) | 42,253. | 0. | | | GENERAL SUPPORT |
| JUNIOR LEAGUE OF BIRMINGHAM 2212 20TH AVENUE SOUTH BIRMINGHAM, AL 35223 | 63-0324707 | 501(C)(3) | 46,001. | 0. | | | GENERAL SUPPORT+SPECIAL PROGRAMS |
| GIRLS INC OF CENTRAL ALABAMA P.O. BOX 130729 BIRMINGHAM, AL 35213 | 63-0328643 | 501(C)(3) | 22,000. | 0. | | | GENERAL SUPPORT |
| CANTERBURY UNITED METHODIST CHURCH P.O. BOX 130699 BIRMINGHAM, AL 35213-0699 | 63-0329624 | CHURCH/SYN | 177,020. | 0. | | | GENERAL SUPPORT |
| JUNIOR ACHIEVEMENT OF ALABAMA PO BOX 19307 HOMEWOOD, AL 35219 | 63-0340866 | 501(C)(3) | 7,200. | 0. | | | GENERAL SUPPORT |

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|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|---|
| UNITED WAY OF SELMA & DALLAS CO. P.O. BOX 298 SELMA, AL 36702 | 63-0340874 | 501(C)(3) | 13,910. | 0. | | | THE ANNUAL CAMPAIGN FOR SELMA UNITED WAY |
| JIMMIE HALE MISSION P.O. BOX 10472 BIRMINGHAM, AL 35202-0472 | 63-0358757 | 501(C)(3) | 34,212. | 0. | | | GENERAL SUPPORT |
| OUR LADY OF SORROWS CATHOLIC CHURCH - 1728 OXMOOR ROAD - BIRMINGHAM, AL 35209 | 63-0366279 | CHURCH/SYN | 53,000. | 0. | | | FOR THE OLS CHARITY FUND |
| WALKER COLLEGE FOUNDATION PO BOX 2228 JASPER, AL 35502-2228 | 63-0369216 | 501(C)(3) | 10,000. | 0. | | | THE LARRY DRUMMOND ENDOWED SCHOLARSHIP FUND |
| BIRMINGHAM MUSIC CLUB P.O. BOX 10486 BIRMINGHAM, AL 35202 | 63-0369767 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| VESTAVIA HILLS BAPTIST CHURCH 2600 VESTAVIA DRIVE BIRMINGHAM, AL 35216 | 63-0375613 | CHURCH/SYN | 48,000. | 0. | | | THE BUDGET |
| ST. FRANCIS XAVIER CATHOLIC CHURCH PO BOX 130669 BIRMINGHAM, AL 35213 | 63-0376520 | CHURCH/SYN | 11,700. | 0. | | | GENERAL SUPPORT |
| VESTAVIA HILLS UNITED METHODIST CHURCH - 2061 KENTUCKY AVENUE - BIRMINGHAM, AL 35216 | 63-0378123 | CHURCH/SYN | 12,500. | 0. | | | GENERAL SUPPORT |
| EPISCOPAL FOUNDATION OF JEFF CO 4941 MONTEVALLO ROAD BIRMINGHAM, AL 35210 | 63-0386404 | 501(C)(3) | 48,243. | 0. | | | GENERAL SUPPORT |

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| SIXTEENTH STREET BAPTIST CHURCH 1530 6TH AVE NORTH BIRMINGHAM, AL 35203 | 63-0397962 | 501(C)(3) | 41,259. | 0. | | | GENERAL SUPPORT |
| DAWSON MEMORIAL BAPTIST CHURCH 1114 OXMOOR RD BIRMINGHAM, AL 35209 | 63-0400587 | 501(C)(3) | 15,000. | 0. | | | GENERAL SUPPORT |
| MILES COLLEGE P.O. BOX 3800 BIRMINGHAM, AL 35208 | 63-0400608 | 501(C)(3) | 25,000. | 0. | | | GENERAL SUPPORT |
| HOLY FAMILY ELEMENTARY SCHOOL 1916 19TH ST ENSLEY, AL 35218 | 63-0412289 | SCHOOL/COL | 15,000. | 0. | | | GENERAL SUPPORT |
| MOUNTAIN BROOK BAPTIST CHURCH 3631 MONTEVALLO ROAD BIRMINGHAM, AL 35213-4299 | 63-0418187 | CHURCH/SYN | 5,000. | 0. | | | GENERAL SUPPORT+SPECIAL PROGRAMS |
| UNIVERSITY OF SOUTH ALABAMA 307 UNIVERSITY BLVD., AD 200 MOBILE, AL 36688 | 63-0477348 | 501(C)(3) | 5,000. | 0. | | | AWARD FOR EXCELLENCE |
| BIRMINGHAM BOTANICAL SOCIETY/FRIENDS OF BIRMINGHAM BOTANICAL GARD - 2612 LANE PARK ROAD - BIRMINGHAM, AL 35223 | 63-0495111 | 501(C)(3) | 160,620. | 0. | | | GENERAL SUPPORT |
| JEFFERSON STATE COMMUNITY COLLEGE 2601 CARSON ROAD BIRMINGHAM, AL 35215 | 63-0501357 | SCHOOL/COL | 26,400. | 0. | | | SAFE ZONE TRAINING SUPPORT |
| NORTHEAST ALABAMA COMMUNITY COLLEGE - PO BOX 159 - ATTN: JENNIFER BROWN, FINANCIAL AID - RAINSVILLE, AL 35986 | 63-0504999 | 501(C)(3) | 5,000. | 0. | | | SCHOLARSHIPS SUPPORT |

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| ADVENT EPISCOPAL DAY SCHOOL 2019 6TH AVENUE NORTH BIRMINGHAM, AL 35203-2701 | 63-0505650 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| JCCEO 300 8TH AVENUE WEST BIRMINGHAM, AL 35204-3039 | 63-0505899 | 501(C)(3) | 10,000. | 0. | | | THE EMERGENCY ASSISTANCE PROGRAM |
| A. G. GASTON BOYS & GIRLS CLUB 4821 AVENUE W BIRMINGHAM, AL 35208 | 63-0514348 | 501(C)(3) | 35,000. | 0. | | | GENERAL SUPPORT |
| BIRMINGHAM URBAN LEAGUE P.O. BOX 11269 BIRMINGHAM, AL 35202 | 63-0516655 | 501(C)(3) | 30,000. | 0. | | | 2020 CENSUS HARD-TO-COUNT OUTREACH |
| UNIVERSITY OF ALABAMA HUNTSVILLE 301 SPARKMAN DRIVE HUNTSVILLE, AL 35899 | 63-0520830 | SCHOOL/COL | 11,000. | 0. | | | SCHOLARSHIP SUPPORT |
| GREATER BIRMINGHAM MINISTRIES 2304 12TH AVENUE NORTH BIRMINGHAM, AL 35234-3111 | 63-0577439 | 501(C)(3) | 44,750. | 0. | | | GENERAL SUPPORT |
| OUR LADY OF THE LAKE CATHOLIC CHURCH/DIOCESE OF BIRMINGHAM - 4609 MARTIN STREET SOUTH - CROPWELL, AL 35054 | 63-0581368 | 501(C)(3) | 43,800. | 0. | | | GENERAL SUPPORT |
| CRISIS CENTER 3600 8TH AVE SOUTH STE 501 BIRMINGHAM, AL 35222 | 63-0583947 | 501(C)(3) | 348,451. | 0. | | | 2020 RECOVERY RESOURCE CENTER+GENERAL SUPPORT |
| SIXTH AVENUE BAPTIST CHURCH 1101 MARTIN LUTHER KING, JR DRIVE S BIRMINGHAM, AL 35211 | 63-0587137 | CHURCH/SYN | 17,000. | 0. | | | GENERAL SUPPORT |

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| CHRISTIAN SERVICE MISSION 3600 3RD AVENUE SOUTH BIRMINGHAM, AL 35222 | 63-0594603 | 501(C)(3) | 16,500. | 0. | | | GENERAL SUPPORT |
| FOUNDRY RESCUE MISSION & RECOVERY CENTER - P.O. BOX 824 - BESSEMER, AL 35021-0824 | 63-0624278 | 501(C)(3) | 66,950. | 0. | | | GENERAL SUPPORT |
| CONCERNED CITIZENS FOR OUR YOUTH, INC. - 1200 BEACON LANE - JASPER, AL 35504 | 63-0640563 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| BRIARWOOD PRESBYTERIAN CHURCH 2200 BRIARWOOD WAY BIRMINGHAM, AL 35243 | 63-0653634 | 501(C)(3) | 8,800. | 0. | | | WORLD MISSIONS |
| UNITED COMMUNITY CENTERS 3617 HICKORY AVE SW BIRMINGHAM, AL 35221 | 63-0678752 | 501(C)(3) | 15,000. | 0. | | | GENERAL SUPPORT |
| NEIGHBORHOOD HOUSING SERVICES OF BIRMINGHAM - 601 19TH STREET NORTH - BIRMINGHAM, AL 35203-2209 | 63-0713056 | 501(C)(3) | 25,000. | 0. | | | GENERAL SUPPORT |
| URBAN MINISTRY, INC. 1229 COTTON AVE. SW BIRMINGHAM, AL 35211 | 63-0717761 | 501(C)(3) | 52,000. | 0. | | | GENERAL SUPPORT+SPECIAL PROGRAMS |
| RUFFNER MOUNTAIN NATURE PRESERVE 1214 SOUTH 81ST STREET BIRMINGHAM, AL 35206 | 63-0733391 | 501(C)(3) | 77,000. | 0. | | | GENERAL SUPPORT |
| RONALD MCDONALD HOUSE CHARITIES OF ALABAMA - 1700 4TH AVE SOUTH - BIRMINGHAM, AL 35233 | 63-0753358 | 501(C)(3) | 42,000. | 0. | | | GENERAL SUPPORT |

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| KING'S HOME P.O. BOX 162 CHELSEA, AL 35043 | 63-0760276 | 501(C)(3) | 38,399. | 0. | | | GENERAL SUPPORT |
| NICHOLS TEMPLE AME CHURCH 701 18TH ST. ENSLEY BIRMINGHAM, AL 35218 | 63-0761550 | 501(C)(3) | 20,000. | 0. | | | GENERAL SUPPORT |
| ALABAMA HUMANITIES FOUNDATION 1100 IRELAND WAY, SUITE 202 BIRMINGHAM, AL 35205-7001 | 63-0787109 | 501(C)(3) | 5,700. | 0. | | | GENERAL SUPPORT |
| URBAN IMPACT 1721 4TH AVE NORTH SUITE 102 BIRMINGHAM, AL 35203 | 63-0795551 | 501(C)(3) | 50,000. | 0. | | | GENERAL SUPPORT |
| ALABAMA INSTITUTE FOR DEAF AND BLIND FOUNDATION - P.O. BOX 698 - TALLADEGA, AL 35161 | 63-0797728 | 501(C)(3) | 5,127. | 0. | | | GENERAL SUPPORT |
| GRANTSWOOD BAPTIST CHURCH 4850 GRANTSWOOD PLACE BIRMINGHAM, AL 35210 | 63-0799495 | CHURCH/SYN | 6,402. | 0. | | | ANONYMOUS-GENERAL SUPPORT |
| WALKER CO. HUMANE SOCIETY P.O. BOX 1407 JASPER, AL 35502 | 63-0809530 | 501(C)(3) | 10,000. | 0. | | | WALKER CO. HUMANE SOCIETY - REMY 2020 |
| ALABAMA WILDLIFE CENTER 100 TERRACE DRIVE OAK MOUNTAIN STAT PELHAM, AL 35124 | 63-0813173 | 501(C)(3) | 7,693. | 0. | | | ANONYMOUS-GENERAL SUPPORT |
| UNIVERSITY OF NORTH ALABAMA FOUNDATION - UNA BOX 5113 - FLORENCE, AL 35632 | 63-0814488 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |

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| SHELBY EMERGENCY ASSISTANCE PO BOX 18 MONTEVALLO, AL 35115 | 63-0816556 | 501(C)(3) | 19,000. | 0. | | | GENERAL SUPPORT |
| SHELBY HUMANE SOCIETY 381 MCDOW ROAD COLUMBIANA, AL 35051 | 63-0817987 | 501(C)(3) | 16,291. | 0. | | | GENERAL SUPPORT |
| MT. PILGRIM BAPTIST CHURCH 143 SEMINOLE CIRCLE FAIRFIELD, AL 35064 | 63-0821185 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| LEADERSHIP BIRMINGHAM P O BOX 2641, BIN 12S BIRMINGHAM, AL 35291 | 63-0833118 | 501(C)(3) | 5,700. | 0. | | | GENERAL SUPPORT |
| COMMUNITY FOOD BANK OF CENTRAL ALABAMA - 107 WALTER DAVIS DRIVE - BIRMINGHAM, AL 35209 | 63-0837956 | 501(C)(3) | 49,377. | 0. | | | GENERAL SUPPORT |
| ASHLAND FIRST UNITED METHODIST CHURCH - P.O. BOX 305 - ASHLAND, AL 36251 | 63-0843032 | CHURCH/SYN | 6,000. | 0. | | | THE CLAY COUNTY COMMUNITY FOOD BANK |
| LAKE MARTIN HUMANE SOCIETY P.O. BOX 634 ALEXANDER CITY, AL 35011 | 63-0847295 | 501(C)(3) | 5,000. | 0. | | | IN HONOR OF POGO, PING PONG, AND ITTY BITY |
| HELPLINE CHRISTIAN OUTREACH MINISTRIES, INC. - 8 ROEBUCK DRIVE - BIRMINGHAM, AL 35215 | 63-0854424 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| ST. MARK'S EPISCOPAL CHURCH 228 DENNISON AVE. SW BIRMINGHAM, AL 35211 | 63-0858007 | 501(C)(3) | 10,000. | 0. | | | GENERAL SUPPORT |

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| ST. VINCENT'S FOUNDATION 1130 22ND ST. S. STE 1000 BIRMINGHAM, AL 35205 | 63-0868066 | 501(C)(3) | 376,200. | 0. | | | GENERAL SUPPORT |
| UNITED WAY OF NORTHWEST ALABAMA P.O. BOX 1228 FLORENCE, AL 35631 | 63-0873878 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| THE CHILDREN'S HOSPITAL FOUNDATION 1600 7TH AVE SOUTH BIRMINGHAM, AL 35233 | 63-0879471 | 501(C)(3) | 25,600. | 0. | | | GENERAL SUPPORT+SPECIAL PROGRAMS |
| ADVANCING SIGHT NETWORK 500 ROBERT JEMISON ROAD BIRMINGHAM, AL 35209-3070 | 63-0880135 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| COOPERATIVE DOWNTOWN MINISTRIES/OLD FIREHOUSE SHELTER - P.O. BOX 11722 - BIRMINGHAM, AL 35202 | 63-0884164 | 501(C)(3) | 83,000. | 0. | | | GENERAL SUPPORT+SPECIAL PROGRAMS |
| MAGIC MOMENTS 2112 11TH AVENUE SOUTH, SUITE 219 BIRMINGHAM, AL 35205 | 63-0887875 | 501(C)(3) | 11,000. | 0. | | | GENERAL SUPPORT |
| ALABAMA HEAD INJURY FOUNDATION 500 CHASE PARK SOUTH SUITE 130 BIRMINGHAM, AL 35244 | 63-0893496 | 501(C)(3) | 8,639. | 0. | | | GENERAL SUPPORT |
| JEFFERSON CO LIBRARY COOPERATIVE, INC. - 2100 PARK PLACE - BIRMINGHAM, AL 35203 | 63-0894761 | 501(C)(3) | 33,000. | 0. | | | GENERAL SUPPORT |
| SMILE-A-MILE P.O. BOX 550155 BIRMINGHAM, AL 35255 | 63-0907544 | 501(C)(3) | 238,250. | 0. | | | GENERAL SUPPORT |

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| RISING STAR BAPTIST CHURCH 319 WEST PARK ST SYLACAUGA, AL 35150 | 63-0917352 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| ALABAMA REGIONAL MEDICAL SERVICES P.O. BOX 11526 BIRMINGHAM, AL 35202 | 63-0932057 | 501(C)(3) | 25,000. | 0. | | | GENERAL SUPPORT |
| PRESCOTT HOUSE P.O. BOX 55892 BIRMINGHAM, AL 35255 | 63-0941451 | 501(C)(3) | 7,500. | 0. | | | GENERAL SUPPORT |
| CORNERSTONE SCHOOLS OF ALABAMA PO BOX 320309 BIRMINGHAM, AL 35232 | 63-0948472 | 501(C)(3) | 46,000. | 0. | | | GENERAL SUPPORT |
| BIRMINGHAM AIDS OUTREACH INC 205 32ND STREET SOUTH BIRMINGHAM, AL 35233 | 63-0948495 | 501(C)(3) | 9,700. | 0. | | | GENERAL SUPPORT IN HONOR OF KAREN MUSGROVE, PHD |
| BIRMINGHAM LANDMARKS 1817 3RD AVE NORTH BIRMINGHAM, AL 35203 | 63-0958984 | 501(C)(3) | 91,200. | 0. | | | GENERAL SUPPORT |
| ROTARY CLUB OF BIRMINGHAM FOUNDATION - HARBERT CENTER/2019 4TH AVE N - BIRMINGHAM, AL 35203 | 63-0960032 | 501(C)(3) | 131,313. | 0. | | | SCHOLARSHIPS SUPPORT |
| HABITAT FOR HUMANITY GREATER BIRMINGHAM - P.O. BOX 540 - FAIRFIELD, AL 35064 | 63-0962910 | 501(C)(3) | 13,750. | 0. | | | GENERAL SUPPORT |
| TITUSVILLE DEVELOPMENT CORPORATION 300 KAPPA AVE SOUTH BIRMINGHAM, AL 35205 | 63-0964639 | 501(C)(3) | 55,000. | 0. | | | GENERAL SUPPORT |

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| PUBLIC AFFAIRS RESEARCH COUNCIL OF AL - P.O. BOX 293931 219 BROOKS HALL/800 LAKESHORE - BIRMINGHAM, AL 35229-3931 | 63-0972435 | 501(C)(3) | 20,925. | 0. | | | GENERAL SUPPORT |
| CAHABA RIVER SOCIETY 2717 7TH AVE S STE 205 BIRMINGHAM, AL 35233 | 63-0987276 | 501(C)(3) | 23,500. | 0. | | | GENERAL SUPPORT |
| COMMUNITY KITCHENS 1024 SOUTH 12TH STREET BIRMINGHAM, AL 35205 | 63-0988804 | 501(C)(3) | 41,500. | 0. | | | GENERAL SUPPORT |
| STUDIO BY THE TRACKS P.O. BOX 101144 IRONDALE, AL 35210-6144 | 63-1004336 | 501(C)(3) | 18,680. | 0. | | | GENERAL SUPPORT |
| BESSEMER CUT OFF ADVOCACY CENTER 1830 DARTMOUTH AVE BESSEMER, AL 35020 | 63-1006387 | 501(C)(3) | 12,500. | 0. | | | TECHNOLOGY TO ALLOW TELECOUNSELING FOR CHILDREN WHO HAVE BEEN ABUSED AND THEIR |
| SAFEHOUSE OF SHELBY COUNTY P.O. BOX 275 PELHAM, AL 35124 | 63-1007280 | 501(C)(3) | 35,125. | 0. | | | GENERAL SUPPORT |
| LEADERSHIP ALABAMA P.O. BOX 131394 BIRMINGHAM, AL 35213 | 63-1007967 | 501(C)(3) | 18,350. | 0. | | | GENERAL SUPPORT |
| AMISTAD MISSION P.O. BOX 23030 NASHVILLE, TN 37202 | 63-1011215 | 501(C)(3) | 15,000. | 0. | | | GENERAL SUPPORT |
| COLLAT JEWISH FAMILY SERVICES 3940 MONTCLAIR RD #205 BIRMINGHAM, AL 35213-2416 | 63-1015318 | 501(C)(3) | 40,250. | 0. | | | GENERAL SUPPORT |

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| LAKESIDE HOSPICE 4010 MASTERS RD PELL CITY, AL 35128 | 63-1035850 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| BIRMINGHAM JEWISH FEDERATION P.O. BOX 130219 BIRMINGHAM, AL 35213 | 63-1045456 | 501(C)(3) | 63,950. | 0. | | | GENERAL SUPPORT |
| A+ EDUCATION PARTNERSHIP P.O. BOX 4433 MONTGOMERY, AL 36103 | 63-1050676 | 501(C)(3) | 38,250. | 0. | | | GENERAL SUPPORT |
| LITERACY COUNCIL OF CENTRAL ALABAMA - 2301 1ST AVE N STE 102 - BIRMINGHAM, AL 35203 | 63-1051186 | 501(C)(3) | 60,128. | 0. | | | GENERAL SUPPORT |
| MARANATHAN FAMILY LEARNING CENTER P.O. BOX 320321 BIRMINGHAM, AL 35232-0321 | 63-1051829 | 501(C)(3) | 28,000. | 0. | | | GENERAL SUPPORT |
| ONE ROOF 1515 SIXTH AVENUE SOUTH, FIFTH FLOOR BIRMINGHAM, AL 35233-1601 | 63-1051908 | 501(C)(3) | 76,000. | 0. | | | GENERAL SUPPORT |
| ALZHEIMER'S OF CENTRAL ALABAMA P.O. BOX 2273 BIRMINGHAM, AL 35201 | 63-1068096 | 501(C)(3) | 102,844. | 0. | | | GENERAL SUPPORT |
| MOUNTAIN BROOK CITY SCHOOLS FOUNDATION - 32 VINE STREET - BIRMINGHAM, AL 35213 | 63-1072587 | 501(C)(3) | 22,041. | 0. | | | GENERAL SUPPORT |
| EQUALITY VOLUNTEER FIRE DEPARTMENT PO BOX 13 EQUALITY, AL 36026 | 63-1076507 | 501(C)(3) | 6,000. | 0. | | | THE COOSA 20 NEW FIRE STATION |

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| INTERCOMMUNITY OUTREACH MINISTRY 340 63RD STREET SOUTH BIRMINGHAM, AL 35212 | 63-1080358 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| MOUNTAIN BROOK COMMUNITY CHURCH 3001 HIGHWAY 280 EAST BIRMINGHAM, AL 35243 | 63-1080839 | CHURCH/SYN | 15,000. | 0. | | | GENERAL SUPPORT |
| MAGNOLIA CHURCH OF CHRIST 2650 VULCAN AVE FLORENCE, AL 35630 | 63-1094793 | 501(C)(3) | 22,000. | 0. | | | GENERAL SUPPORT |
| EXCEPTIONAL FOUNDATION 1616 OXMOOR ROAD BIRMINGHAM, AL 35209 | 63-1096855 | 501(C)(3) | 34,750. | 0. | | | GENERAL SUPPORT |
| ALABAMA SYMPHONIC ASSOCIATION 3621 6TH AVENUE SOUTH BIRMINGHAM, AL 35222 | 63-1103036 | 501(C)(3) | 192,896. | 0. | | | GENERAL SUPPORT |
| BETTER BASICS 1231 2ND AVENUE SOUTH BIRMINGHAM, AL 35233 | 63-1106040 | 501(C)(3) | 77,900. | 0. | | | GENERAL SUPPORT |
| OASIS WOMEN'S COUNSELING CENTER 1900 14TH AVENUE SOUTH BIRMINGHAM, AL 35205 | 63-1128764 | 501(C)(3) | 69,130. | 0. | | | GENERAL SUPPORT |
| CREATIVE WELLNESS INSTITUTE 1116 23RD STREET SOUTH BIRMINGHAM, AL 35205 | 63-1129971 | 501(C)(3) | 8,000. | 0. | | | THE FAMILYCARE INITIATIVE |
| HOMEWOOD CITY SCHOOLS FOUNDATION PO BOX 59764 BIRMINGHAM, AL 35259 | 63-1132466 | 501(C)(3) | 20,000. | 0. | | | THE CONTRIBUTION OF BILL AND EMMIE SMITH FOR THE LEGACY FOR LEARNING CAMPAIGN |

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| CHABAD OF ALABAMA 3040 OVERTON ROAD BIRMINGHAM, AL 35223-2378 | 63-1148813 | 501(C)(3) | 7,000. | 0. | | | GENERAL SUPPORT |
| ANIMAL SHELTER OF PELL CITY PO BOX 566 PELL CITY, AL 35125 | 63-1149326 | 501(C)(3) | 10,000. | 0. | | | GENERAL SUPPORT |
| RESTORATION ACADEMY P.O. BOX 30 FAIRFIELD, AL 35064 | 63-1158984 | 501(C)(3) | 43,750. | 0. | | | GENERAL SUPPORT |
| KID ONE TRANSPORT SYSTEM PO BOX 11864 BIRMINGHAM, AL 35202 | 63-1165579 | 501(C)(3) | 13,069. | 0. | | | GENERAL SUPPORT |
| COMMUNITY GRIEF SUPPORT SERVICE 1119 OXMOOR ROAD HOMEWOOD, AL 35209 | 63-1178251 | 501(C)(3) | 6,000. | 0. | | | GENERAL SUPPORT |
| ALABAMA ARISE P.O. BOX 1188 MONTGOMERY, AL 36101-0612 | 63-1186365 | 501(C)(3) | 22,300. | 0. | | | GENERAL SUPPORT+ CENSUS 2020 COMPLETE COUNT OUTREACH |
| VESTAVIA HILLS LIBRARY FOUNDATION 1221 MONTGOMERY HIGHWAY BIRMINGHAM, AL 35216 | 63-1186876 | 501(C)(3) | 15,000. | 0. | | | GENERAL SUPPORT |
| HAND-IN-PAW, INC. 617 38TH STREET SOUTH BIRMINGHAM, AL 35222 | 63-1190375 | 501(C)(3) | 16,500. | 0. | | | GENERAL SUPPORT |
| FIRST LIGHT 2230 4TH AVENUE NORTH BIRMINGHAM, AL 35203 | 63-1197189 | 501(C)(3) | 33,450. | 0. | | | GENERAL SUPPORT |

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| HANDS ON BIRMINGHAM PO BOX 320189 BIRMINGHAM, AL 35232 | 63-1207098 | 501(C)(3) | 5,947. | 0. | | | ON BEHALF OF O'NEAL STEEL FOR THE 2020 MLK COMMUNITY CENTER PAVILION BUILD |
| MY FATHER'S HOUSE FOUNDATION, INC. P.O. BOX 2705 BIRMINGHAM, AL 35222 | 63-1213675 | 501(C)(3) | 8,000. | 0. | | | GENERAL SUPPORT |
| BLOUNT CO. EDUCATION FOUNDATION, INC - P.O. BOX 603 - ONEONTA, AL 35121 | 63-1215348 | 501(C)(3) | 20,000. | 0. | | | GENERAL SUPPORT |
| YOUTH "IN" AGING PREVENTION & TREATMENT FITNESS INC. - 2601 HIGHLAND AVENUE SOUTH - BIRMINGHAM, AL 35205 | 63-1225483 | 501(C)(3) | 25,000. | 0. | | | GENERAL SUPPORT |
| HISPANIC INTEREST COALITION OF AL P.O. BOX 190299 HOMWOOD, AL 35219 | 63-1225764 | 501(C)(3) | 78,500. | 0. | | | EMERGENCY ASSISTANCE |
| SIDEWALK FILM CENTER AND CINEMA 1821 2ND AVENUE NORTH BOX 215 BIRMINGHAM, AL 35203 | 63-1227239 | 501(C)(3) | 43,967. | 0. | | | GENERAL SUPPORT |
| LIGHTHOUSE CHURCH MINISTRIES 4600 9TH AVE N. BIRMINGHAM, AL 35212 | 63-1231580 | 501(C)(3) | 21,000. | 0. | | | GENERAL SUPPORT |
| VULCAN PARK FOUNDATION 1701 VALLEY VIEW DRIVE BIRMINGHAM, AL 35209 | 63-1233997 | 501(C)(3) | 26,000. | 0. | | | GENERAL SUPPORT |
| HOPE HOUSE P.O. BOX 127 ONEONTA, AL 35121 | 63-1235727 | 501(C)(3) | 25,000. | 0. | | | GENERAL SUPPORT |

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| BIRMINGHAM AREA TENNIS ASSOCIATION P.O. BOX 131114 BIRMINGHAM, AL 35213-6114 | 63-1241128 | 501(C)(3) | 10,000. | 0. | | | GENERAL SUPPORT |
| BELL CENTER FOR EARLY INTERVENTION PROGRAMS - 1700 29TH COURT SOUTH - BIRMINGHAM, AL 35209 | 63-1244330 | 501(C)(3) | 143,247. | 0. | | | GENERAL SUPPORT |
| MISSION OF HOPE P.O. BOX 878 DORA, AL 35062 | 63-1253204 | 501(C)(3) | 15,000. | 0. | | | GENERAL SUPPORT |
| CAHABA VALLEY HEALTH CARE, INC 1515 6TH AVE SOUTH BIRMINGHAM, AL 35233 | 63-1254350 | 501(C)(3) | 19,000. | 0. | | | THE VISION PROGRAM AND GENERAL SUPPORT |
| TUMTUM TREE FOUNDATION P.O. BOX 43651 BIRMINGHAM, AL 35243 | 63-1256035 | 501(C)(3) | 35,000. | 0. | | | GENERAL SUPPORT |
| CHURCH OF THE HIGHLANDS 3660 GRANDVIEW PKWY STE 100 BIRMINGHAM, AL 35243-3339 | 63-1258442 | 501(C)(3) | 13,000. | 0. | | | GENERAL SUPPORT |
| CENTER FOR EXECUTIVE LEADERSHIP 200 UNION HILL DRIVE STE 200 BIRMINGHAM, AL 35209 | 63-1263584 | 501(C)(3) | 33,500. | 0. | | | GENERAL SUPPORT |
| BLACK BELT COMMUNITY FOUNDATION P O BOX 2020 SELMA, AL 36701 | 63-1270745 | 501(C)(3) | 5,000. | 0. | | | CENSUS 2020 COMPLETE COUNT OUTREACH |
| HISTORIC BETHEL BAPTIST CHURCH COMMUNITY RESTORATION FUND - 3200 28TH AVE N - BIRMINGHAM, AL 35207 | 63-1271978 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |

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| YOUTHSERVE P.O. BOX 530334 BIRMINGHAM, AL 35253 | 63-1278901 | 501(C)(3) | 34,750. | 0. | | | GENERAL SUPPORT |
| RAILROAD PARK FOUNDATION P.O. BOX 13691 BIRMINGHAM, AL 35202 | 63-1280818 | 501(C)(3) | 87,600. | 0. | | | GENERAL SUPPORT |
| THE HEALING PLACE PO BOX 2765 MUSCLE SHOALS, AL 35662-2765 | 63-1285227 | 501(C)(3) | 25,000. | 0. | | | GENERAL SUPPORT |
| OAK MOUNTAIN MISSIONS MINISTRIES 2699 PELHAM PARKWAY PELHAM, AL 35124 | 63-1288041 | 501(C)(3) | 5,461. | 0. | | | GENERAL SUPPORT |
| AUBURN UNIVERSITY 317 SOUTH COLLEGE STREET AUBURN UNIVERSITY, AL 36849 | 63-6000724 | SCHOOL/COL | 46,600. | 0. | | | GENERAL SUPPORT + SPECIAL PROGRAMS + SCHOLARSHIPS |
| BIRMINGHAM CITY SCHOOLS 2015 PARK PLACE NORTH BIRMINGHAM, AL 35203 | 63-6000767 | SCHOOL/COL | 27,000. | 0. | | | PRE-K FAMILY INVOLVEMENT PROGRAM AIDE (\$15,000) AND PRE-K RESOURCE CENTER AIDE (\$12,000) |
| MATTHEWS ELEMENTARY SCHOOL 1225 RICEMINE ROAD (TUSCALOOSA BD OF EDUCATION) - NORTHPORT, AL 35476 | 63-6000811 | 501(C)(3) | 7,000. | 0. | | | SPECIAL EDUCATION (\$2,000) AND READING PROGRAM (\$2,000) |
| JACKSONVILLE STATE UNIVERSITY 700 PELHAM ROAD NORTH JACKSONVILLE, AL 36265-1602 | 63-6001089 | SCHOOL/COL | 8,000. | 0. | | | SCHOLARSHIPS SUPPORT |
| TARRANT CITY BOARD OF EDUCATION 1318 ALABAMA STREET TARRANT, AL 35217 | 63-6001122 | SCHOOL/COL | 40,000. | 0. | | | 2020 SAIL FUNDING FOR SPROUT |

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| UNIVERSITY OF ALABAMA 355 ROSE ADMINISTRATION BOX 870123 TUSCALOOSA, AL 35487 | 63-6001138 | 501(C)(3) | 120,974. | 0. | | | GENERAL SUPPORT + SPECIAL PROGRAMS + SCHOLARSHIPS |
| BIRMINGHAM PUBLIC LIBRARY 2100 PARK PLACE BIRMINGHAM, AL 35203 | 63-6001201 | GOVERNMENT | 5,000. | 0. | | | GENERAL SUPPORT |
| ONEONTA PUBLIC LIBRARY 221 2ND ST S ONEONTA, AL 35121 | 63-6001333 | 501(C)(3) | 8,000. | 0. | | | GENERAL SUPPORT |
| CITY OF PELL CITY 1905 FIRST AVENUE NORTH PELL CITY, AL 35125 | 63-6001342 | GOVERNMENT | 40,000. | 0. | | | GENERAL SUPPORT |
| CITY OF PLEASANT GROVE 501 PARK RD. BIRMINGHAM, AL 35127 | 63-6001348 | 501(C)(3) | 5,000. | 0. | | | PERSONAL PROTECTIVE EQUIPMENT FOR ESSENTIAL WORKERS. |
| ST. CLAIR COUNTY COMMISSION 165 FIFTH AVE SUITE 100 ASHVILLE, AL 35953 | 63-6001688 | 501(C)(3) | 25,000. | 0. | | | GENERAL SUPPORT |
| CRESTLINE ELEMENTARY SCHOOL 3785 JACKSON BLVD BIRMINGHAM, AL 35213 | 63-6005319 | 501(C)(3) | 8,000. | 0. | | | GENERAL SUPPORT |
| UNIVERSITY OF ALABAMA AT BIRMINGHAM - AB 1230 1720 2ND AVENUE SOUTH - BIRMINGHAM, AL 35294-0112 | 63-6005396 | SCHOOL/COLLEGE W | 2,812,659. | 0. | | | GENERAL SUPPORT + SPECIAL PROGRAMS + SCHOLARSHIPS |
| AUBURN UNIVERSITY FOUNDATION 317 S COLLEGE ST AUBURN, AL 36849 | 63-6022422 | 501(C)(3) | 12,000. | 0. | | | AUBURN ENGINEERING FOUNDATION |

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| LINLY HEFLIN UNIT 13 OFFICE PARK CIRCLE SUITE 8 BIRMINGHAM, AL 35223 | 63-6047968 | 501(C)(3) | 13,530. | 0. | | | GENERAL SUPPORT |
| BIRMINGHAM CHILDREN'S THEATRE P.O. BOX 1362 BIRMINGHAM, AL 35201-1362 | 63-6050838 | 501(C)(3) | 9,000. | 0. | | | GENERAL SUPPORT |
| ALABAMA EDUCATIONAL TELEVISION FOUNDATION AUTHORITY/ALABAMA PUBLIC TELEVISION - 2112 11TH AVE S STE 400 - BIRMINGHAM, AL | 63-6050895 | 501(C)(3) | 9,889. | 0. | | | GENERAL SUPPORT |
| SOUTHERN MUSEUM OF FLIGHT 4343 73RD STREET NORTH BIRMINGHAM, AL 35206 | 63-6051240 | 501(C)(3) | 10,000. | 0. | | | RELOCATION |
| BIRMINGHAM KIWANIS FOUNDATION 2019 4TH AVENUE NORTH BIRMINGHAM, AL 35203 | 63-6056848 | 501(C)(3) | 34,000. | 0. | | | GENERAL SUPPORT |
| BAPTIST HEALTH FOUNDATION 1130 22ND STREET SOUTH/SUITE 3200 BIRMINGHAM, AL 35205 | 63-6062097 | 501(C)(3) | 40,600. | 0. | | | GENERAL SUPPORT |
| RED MOUNTAIN GARDEN CLUB 4026 KNOLLWOOD DRIVE BIRMINGHAM, AL 35243 | 63-6063951 | 501(C)(3) | 6,769. | 0. | | | GENERAL SUPPORT |
| UAB EDUCATIONAL FOUNDATION 1717 11TH AVENUE S STE 103-A BIRMINGHAM, AL 35205 | 63-6155094 | 501(C)(3) | 62,500. | 0. | | | GENERAL SUPPORT |
| MISSISSIPPI STATE UNIVERSITY FOUNDATION, INC. - PO BOX 6149 - MISSISSIPPI STATE, MS 39762 | 64-0410581 | 501(C)(3) | 80,000. | 0. | | | GENERAL SUPPORT |

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| BIGLIFE PO BOX 110431 NAPLES, FL 34108 | 65-1060939 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| CAPSTONE CHURCH 4115 WATERMELON RD. NORTHPORT, AL 35473 | 68-0519126 | 501(C)(3) | 10,000. | 0. | | | GENERAL SUPPORT |
| UNIVERSITY OF NEW ORLEANS FOUNDATION - 2021 LAKESHORE DR STE 420 - NEW ORLEANS, LA 70122-3540 | 72-1051326 | 501(C)(3) | 7,500. | 0. | | | GENERAL SUPPORT FOR WWNO |
| LOVELADY CENTER/FREEDOM RAIN 7916 2ND AVE S BIRMINGHAM, AL 35206 | 72-1344856 | 501(C)(3) | 13,000. | 0. | | | GENERAL SUPPORT |
| PELL CITY ROTARY CLUB FOUNDATION PO BOX 953 PELL CITY, AL 35125 | 72-1376399 | 501(C)(3) | 6,000. | 0. | | | THE ROY COX GOLF TOURNAMENT (\$1,000) |
| EYESIGHT FOUNDATION OF ALABAMA 700 18TH ST SOUTH STE 123 BIRMINGHAM, AL 35233 | 72-1378980 | 501(C)(3) | 16,944. | 0. | | | GENERAL SUPPORT |
| FRESHWATER LAND TRUST P.O. BOX 337 BIRMINGHAM, AL 35201 | 72-1387424 | 501(C)(3) | 257,028. | 0. | | | GENERAL SUPPORT |
| BLACK WARRIOR RIVERKEEPER 712 37TH STREET SOUTH BIRMINGHAM, AL 35222 | 72-1537394 | 501(C)(3) | 17,900. | 0. | | | GENERAL SUPPORT |
| BATON ROUGE AREA FOUNDATION 402 N. FOURTH STREET BATON ROUGE, LA 70802 | 72-6030391 | 501(C)(3) | 10,500. | 0. | | | FOR COCA-COLA UNITED EMPLOYEE RELIEF FUND |

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| HOUSTON METHODIST HOSPITAL FOUNDATION - PO BOX 4384 - HOUSTON, TX 77210 | 74-1180155 | 501(C)(3) | 30,000. | 0. | | | GENERAL SUPPORT |
| LIFTFUND, INC. 2007 W. MARTIN ST SAN ANTONIO, TX 78207 | 74-2712770 | 501(C)(3) | 50,000. | 0. | | | GENERAL SUPPORT |
| FAITH MINISTRY PO BOX 756 MCALLEN, TX 78505 | 74-2723088 | 501(C)(3) | 11,000. | 0. | | | GENERAL SUPPORT |
| CLAYTON DABNEY FOUNDATION FOR KIDS WITH CANCER - 6500 GREENVILLE AVE. SUITE 342 - DALLAS, TX 75206 | 75-2641482 | 501(C)(3) | 10,000. | 0. | | | CLAYTON'S WINGS AND LOVE LUNCHEON - JENNY SAPHIER |
| REBUILDING TOGETHER HOUSTON 104 N GREENWOOD STE 100 HOUSTON, TX 77011 | 76-0027902 | 501(C)(3) | 12,500. | 0. | | | GENERAL SUPPORT |
| EMPOWERED TO CONQUER YOUTH CONFERENCES, INC. - P.O. BOX 381085 - BIRMINGHAM, AL 35238 | 80-0476754 | 501(C)(3) | 15,000. | 0. | | | GENERAL SUPPORT |
| OHANA INSTITUTE 12805 US HWY98 E STE J 100 ROSEMARY BEACH, FL 32461 | 80-0728987 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| BIRMINGHAM HOLOCAUST EDUCATION CENTER - P.O. BOX 130805 - BIRMINGHAM, AL 35213 | 80-0955027 | 501(C)(3) | 11,700. | 0. | | | GENERAL SUPPORT |
| BIG SKY COMMUNITY ORGANIZATION PO BOX 161404 BIG SKY, MT 59716-1404 | 81-0520589 | 501(C)(3) | 20,000. | 0. | | | GENERAL SUPPORT |

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| MISSION ALABAMA PO BOX 8236 BIRMINGHAM, AL 35218 | 81-0678615 | 501(C)(3) | 31,500. | 0. | | | FOOD DISTRIBUTION |
| COMMUNITY CARE DEVELOPMENT NETWORK PO BOX 610924 BIRMINGHAM, AL 35261 | 81-0955665 | 501(C)(3) | 36,000. | 0. | | | GENERAL SUPPORT |
| NEGRO SOUTHERN LEAGUE MUSEUM 120 16TH ST. SOUTH BIRMINGHAM, AL 35233 | 81-1034180 | 501(C)(3) | 8,000. | 0. | | | GENERAL SUPPORT |
| HEARTS OF WHEELS 1332 AMERICANA DR BIRMINGHAM, AL 35215-4158 | 81-1570076 | 501(C)(3) | 13,000. | 0. | | | GENERAL SUPPORT |
| GIRLZ TALK UNITED 1067 LEXINGTON DRIVE MOODY, AL 35004 | 81-1988996 | 501(C)(3) | 8,000. | 0. | | | GENERAL SUPPORT |
| MIKE SLIVE FOUNDATION FOR PROSTATE CANCER RESEARCH - PO BOX 530748 - BIRMINGHAM, AL 35253 | 81-2296439 | 501(C)(3) | 15,500. | 0. | | | GENERAL SUPPORT |
| LIFTING AS WE CLIMB FOUNDATION 857 CREST COVE HOOVER, AL 35226 | 81-2716891 | 501(C)(3) | 8,000. | 0. | | | GENERAL SUPPORT |
| PNEUMA GALLERY 1218 OAKLAND AVE BIRMINGHAM, AL 35218 | 81-3474502 | 501(C)(3) | 5,000. | 0. | | | WESTERN AREA GRANT - ABCD COMMUNITY SUPPORT |
| MEDICAL FOUNDATION OF JEFFERSON COUNTY - 901 18TH STREET SOUTH - BIRMINGHAM, AL 35205 | 81-3680210 | 501(C)(3) | 50,000. | 0. | | | PROJECT ACCESS |

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| DETERMINED TO BE MENTOR AND LEADERSHIP (D2B) - 300 WINDSTONE LN - CHELSEA, AL 35043-9609 | 81-3817570 | 501(C)(3) | 6,000. | 0. | | | GENERAL SUPPORT |
| RUN BIKE AND SWIM INC. PO BOX 1661 BIRMINGHAM, AL 35201 | 81-3822487 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| ENDEAVOR ATLANTA, INC. 255 E PACES FERRY RD NE STE 700 ATLANTA, GA 30305 | 81-4406875 | 501(C)(3) | 75,000. | 0. | | | TO SUPPORT HIGH IMPACT ENTREPRENEURSHIP IN BIRMINGHAM, AL |
| KITTY KAT HAVEN & RESCUE 2113 MARLBORO ST HOOVER, AL 35226 | 81-5382780 | 501(C)(3) | 5,000. | 0. | | | KITTY KAT HAVEN & RESCUE - REMY 2020 |
| BY FAITH COMMUNITY DEVELOPMENT CORPORATION - PO BOX 178 - ADAMSVILLE, AL 35005 | 81-5405743 | 501(C)(3) | 24,000. | 0. | | | GENERAL SUPPORT |
| ROBERT E. REED GASTROINTESTINAL ONCOLOGY RESEARCH FOUNDATION - P O BOX 530186 - BIRMINGHAM, AL 35253 | 82-0565754 | 501(C)(3) | 15,008. | 0. | | | BY JOHN COLEMAN IN MEMORY OF SID COLEMAN, JR. |
| HOLY SPIRIT WIND MINISTRIES, INC. 6448 WATERS EDGE CIR BESSEMER, AL 35022-1639 | 82-0925515 | 501(C)(3) | 15,000. | 0. | | | GENERAL SUPPORT |
| BUILD UP FOR URBAN PROSPERITY 2301 AVENUE E BIRMINGHAM, AL 35218 | 82-2592447 | 501(C)(3) | 22,500. | 0. | | | GENERAL SUPPORT |
| JALAYAH HACKMAN FOUNDATION 1901 OTWELL ROAD JASPER, AL 35504 | 82-2615918 | 501(C)(3) | 17,000. | 0. | | | GENERAL SUPPORT |

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| HOME IN PLACE 53 GUILDSWOOD TUSCALOOSA, AL 35401 | 82-2804571 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| COMMON GROUND SHOALS P.O. BOX 485 FLORENCE, AL 35631 | 82-2972090 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| BLESSED BROKENNESS 402 OFFICE PARK DRIVE STE 250A BIRMINGHAM, AL 35223-2417 | 82-3345239 | 501(C)(3) | 5,500. | 0. | | | GENERAL SUPPORT |
| EXPOSURE COMMUNITY DEVELOPMENT CORPORATION - 1324 YUKON STREET - BIRMINGHAM, AL 35224 | 82-3983490 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| NURTURING GOLDEN HEARTS P.O. BOX 1511 BESSEMER, AL 35020 | 82-4864370 | 501(C)(3) | 15,000. | 0. | | | GENERAL SUPPORT |
| CHOCOLATE MILK MOMMIES 1206 INVERNESS LANDING SHOAL CREEK, AL 35242 | 83-0728610 | 501(C)(3) | 30,000. | 0. | | | GENERAL SUPPORT |
| LEGACY WORKS 459 MAIN STREET UNITE 264 TRUSSVILLE, AL 35173 | 83-1990370 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| PAINT ROCK FOREST RESEARCH CENTER 3402 ALTAMONT RD S BIRMINGHAM, AL 35205 | 83-2360973 | 501(C)(3) | 7,000. | 0. | | | GENERAL SUPPORT |
| BUSH HILLS CONNECTIONS 1203 BUSH CIR BIRMINGHAM, AL 35208 | 83-2443515 | 501(C)(3) | 16,245. | 0. | | | GENERAL SUPPORT |

Schedule I (Form 990)

**THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM**

Schedule I (Form 990)

63-1209631

Page 1

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| STAY FOCUSED PROJECT 825 CHERRY AVE APT 295 FORESTDALE, AL 35214 | 83-2574603 | 501(C)(3) | 8,000. | 0. | | | GENERAL SUPPORT |
| HUB WORLDWIDE 5120 6TH AVE S BIRMINGHAM, AL 35212 | 83-3016132 | 501(C)(3) | 9,000. | 0. | | | GENERAL SUPPORT |
| FOOD FOR OUR JOURNEY 2418 HUNTINGTON GLEN DR BIRMINGHAM, AL 35226-1997 | 83-3605481 | 501(C)(3) | 15,000. | 0. | | | GENERAL SUPPORT |
| YOUNG LIFE OF BIRMINGHAM P.O. BOX 590014 BIRMINGHAM, AL 35259 | 84-0385934 | 501(C)(3) | 8,000. | 0. | | | GENERAL SUPPORT |
| MILE HIGH UNITED WAY 711 PARK AVE. W. DENVER, CO 80205 | 84-0404235 | 501(C)(3) | 10,000. | 0. | | | GENERAL SUPPORT |
| ROUTT COUNTY COUNCIL ON AGING, INC. - PO BOX 770207 - STEAMBOAT SPR, CO 80477-0207 | 84-0678596 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| DENVER HOSPICE 501 S CHERRY STREET SUITE 700 DENVER, CO 80246 | 84-0743121 | 501(C)(3) | 50,000. | 0. | | | GENERAL SUPPORT |
| CHILDREN'S HOSPITAL COLORADO FOUNDATION - 13123 EAST 16TH AVENUE, B045 - AURORA, CO 80045 | 84-0813462 | 501(C)(3) | 13,000. | 0. | | | SPECIAL PROGRAMS |
| CREATE BIRMINGHAM 310 18TH ST N. SUITE 303 BIRMINGHAM, AL 35203 | 84-1631034 | 501(C)(3) | 61,500. | 0. | | | GENERAL SUPPORT |

Schedule I (Form 990)

**THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM**

Schedule I (Form 990)

63-1209631

Page 1

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|--|
| COMMUNITY SERVICES FOR VISION REHABILITATION - 600 BEL AIR BLVD. SUITE 110 - MOBILE, AL 36606 | 84-1669407 | 501(C)(3) | 40,000. | 0. | | | THE OPERATIONS AND TECHNOLOGY UPDATE |
| GLOBAL MEDIA OUTREACH 7160 DALLAS PKWY - STE 200 PLANO, TX 75024 | 84-1720344 | 501(C)(3) | 50,000. | 0. | | | GENERAL SUPPORT |
| IGNITE ALABAMA 928 46TH ST. ENSLEY BIRMINGHAM, AL 35208 | 84-2372949 | 501(C)(3) | 10,000. | 0. | | | GENERAL SUPPORT |
| FORGE BREAST CANCER SURVIVOR CENTER - 1321 19TH ST. S. - BIRMINGHAM, AL 35205 | 84-2441327 | 501(C)(3) | 475,000. | 0. | | | 2020 WORK OF FORGE SURVIVORSHIP CENTER |
| PETALS OF LOVE OUTREACH 1410 7TH WAY CIR PLEASANT GRV, AL 35127-1463 | 84-3281226 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| VINEGAR 701 37TH ST S #12 BIRMINGHAM,, AL 35222 | 84-3311771 | 501(C)(3) | 15,200. | 0. | | | GENERAL SUPPORT |
| ADJACENT SPACE 3052 VALLEY RIDGE ROAD BIRMINGHAM, AL 35242 | 84-4934282 | 501(C)(3) | 15,000. | 0. | | | GENERAL SUPPORT |
| NAVIGATORS P O BOX 6000 COLORADO SPRINGS, CO 80934 | 84-6007896 | 501(C)(3) | 10,000. | 0. | | | GENERAL SUPPORT |
| BOYS & GIRLS CLUB OF FARMINGTON 1925 POSITIVE WAY FARMINGTON, NM 87401 | 85-0161421 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |

Schedule I (Form 990)

**THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM**

Schedule I (Form 990)

63-1209631

Page 1

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|---|
| CENTER FOR ACTION AND CONTEMPLATION - PO BOX 12464 - ALBUQUERQUE, NM 87195 | 85-0354965 | 501(C)(3) | 5,000. | 0. | | | IN HONOR OF CATHERINE MEEHAN WHO IS A LIVING SCHOOL PARTICIPANT |
| TAKE - TRANSGENDER ADVOCATES KNOWLEDGEABLE EMPOWERING - 340 E VIEW BLVD - BIRMINGHAM, AL 35215-7746 | 85-0702039 | 501(C)(3) | 6,150. | 0. | | | TRANS CRISIS FUND AND ANNUAL 2ND CHANCE PROM - LGBTQ FUND 2019 |
| POWER OF LIFE FOUNDATION P.O. BOX 5603 BIRMINGHAM, AL 35207 | 85-1174850 | 501(C)(3) | 8,000. | 0. | | | GENERAL SUPPORT |
| FIREHOUSE COMMUNITY ARTS CENTER 412 41ST STREET S. BIRMINGHAM, AL 35222 | 85-1299138 | 501(C)(3) | 5,000. | 0. | | | GENERAL SUPPORT |
| CANCER AWARENESS NETWORK FOR CHILDREN, INC. - 209 LAKEWOOD CIR - ADAMSVILLE, AL 35005 | 87-0714256 | 501(C)(3) | 8,000. | 0. | | | GENERAL SUPPORT |
| AMERICAN BASEBALL FOUNDATION 833 SAINT VINCENTS DRIVE SUITE 205A BIRMINGHAM, AL 35205-1609 | 88-0313231 | 501(C)(3) | 10,600. | 0. | | | GENERAL SUPPORT |
| BREAKTHROUGH COLLABORATIVE 2101 MAGNOLIA AVE S STE 407 BIRMINGHAM, AL 35205 | 94-3140620 | 501(C)(3) | 15,500. | 0. | | | GENERAL SUPPORT |
| BIRMINGHAM ATHLETIC PARTNERSHIP P.O. BOX 10163 BIRMINGHAM, AL 35202-0163 | 94-3423843 | 501(C)(3) | 7,000. | 0. | | | GENERAL SUPPORT |
| CALIFORNIA COMMUNITY FOUNDATION 221 S. FIGUEROA ST STE 400 LOS ANGELES, CA 90012 | 95-3510055 | 501(C)(3) | 5,000. | 0. | | | CALIFORNIA WILDFIRE RELIEF EFFORTS |

Schedule I (Form 990)

Schedule I (Form 990)

Page 1

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11-05-20

**THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM**

63-1209631

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of noncash assistance |
|---------------------------------|--------------------------|--------------------------|-----------------------------------|---|---------------------------------------|
| SCHOLARSHIPS | 67 | 160,106. | 0. | N/A | N/A |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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

PART I, LINE 2:

THE FOUNDATION MONITORS THE PROGRESS OF ITS AWARDED GRANTS BY REQUIRING AN
UPDATE REPORT FROM THE GRANTEE SIX MONTHS AFTER THE AWARD, AND ADDITIONAL
REPORTS EACH SIX MONTHS UNTIL ALL FUNDS AWARDED HAVE BEEN EXPENDED.
ADDITIONAL AWARDS WILL NOT BE MADE IF REPORTS ARE OUTSTANDING. ALL CHECKS
FOR SCHOLARSHIPS ARE SENT DIRECTLY TO THE FINANCIAL AID OFFICES AFTER WE
HAVE RECEIVED VERIFICATION OF ENROLLMENT. THE INSTITUTION IS REQUESTED TO
REFUND DIRECTLY TO US ANY UNUSED PORTION OF THE AMOUNT AWARDED, AND TO
NOTIFY US IF THE STUDENT'S STATUS CHANGES FROM FULL-TIME.

Part IV Supplemental Information

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: UAB WOMEN'S CLUB

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR UAB WOMEN'S CLUB SCHOLARSHIP

FUND TO BE USED FOR SCHOLARSHIPS BENEFITTING YOUNG WOMEN FROM THE GREATER
BIRMINGHAM AREA

NAME OF ORGANIZATION OR GOVERNMENT: LAKE JUNALUSKA ASSEMBLY INC

(H) PURPOSE OF GRANT OR ASSISTANCE: FUNDS TO BE USED FOR CARE AND

MAINTENANCE OF THE LAKE, LAKESHORE, BRIDGE, DAM, INCLUDING DREDGING, AND
MAINTENANCE OF THE SUSANNAH WESLEY GARDENS.

NAME OF ORGANIZATION OR GOVERNMENT:

MARTIN LIPSCOMB PERFORMING ARTS CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: MATCHING FUNDS FOR NEW FACILITY.

SHOULD CONSTRUCTION OF A NEW FACILITY NOT BEGIN WITHIN 3 YEARS, MONIES
SHOULD BE REFUNDED TO THE MATTHEW 6:2 FUND.

NAME OF ORGANIZATION OR GOVERNMENT: BESSEMER CUT OFF ADVOCACY CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: TECHNOLOGY TO ALLOW TELECOUNSELING

FOR CHILDREN WHO HAVE BEEN ABUSED AND THEIR NON-OFFENDING CAREGIVERS.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2020

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Name of the organization

**THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM**

Employer identification number

63-1209631

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

a Receive a severance payment or change-of-control payment?

b Participate in or receive payment from a supplemental nonqualified retirement plan?

c Participate in or receive payment from an equity-based compensation arrangement?

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

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

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

a The organization?

b Any related organization?

If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

a The organization?

b Any related organization?

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

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

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

Schedule J (Form 990) 2020

Schedule J (Form 990) 2020

Page 2

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

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Part III Supplemental Information

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

PART I, LINE 3:

THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM PARTICIPATES IN THE SALARY
AND BENEFITS SURVEY THAT IS CONDUCTED ANNUALLY BY THE COUNCIL ON
FOUNDATIONS. SALARY LEVELS OF ALL STAFF MEMBERS ARE COMPARED TO SALARY
LEVELS OF OUR PEERS IN OUR ASSET SIZE. THE EXECUTIVE AND FINANCE
COMMITTEES APPROVE THE BUDGET WHICH INCLUDES ALL STAFF SALARIES AND
FORWARDS ON TO THE FULL BOARD FOR THEIR APPROVAL.

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

2020

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

Name of the organization **THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM** Employer identification number **63-1209631**

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 | 159 | 8,770,100. | FMV OR ESTIMATE |
| 10 Securities - Closely held stock | X | 7 | 4,700,683. | FMV OR ESTIMATE |
| 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 V, Donee Acknowledgement 29 0

| | Yes | No |
|---|-----|----|
| 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? | | 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 nonstandard 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 didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II. | | |

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

Schedule M (Form 990) 2020

Part II

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

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2020

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Inspection

Name of the organization

THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM

Employer identification number
63-1209631

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

WE LEVERAGE DONOR GIVING TO MEET COMMUNITY NEEDS FOREVER.

FORM 990, PART VI, SECTION B, LINE 11B:

THE BOARD OF DIRECTORS HAS ADOPTED THE POLICY THAT THE AUDIT COMMITTEE OF
THE BOARD WILL FIRST REVIEW A DRAFT OF THE FORM 990. THE DRAFT IS THEN
SENT TO THE FULL BOARD. THE PRESIDENT WILL SIGN THE FINAL DOCUMENT. COPIES
OF THE FORM 990 ARE DISTRIBUTED TO THE FULL BOARD AND THEN THE FORM 990 IS
FILED WITH THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, SECTION B, LINE 12C:

A CONFLICT OF INTEREST POLICY IS DISTRIBUTED AND COMPLETED ANNUALLY BY BOTH
THE STAFF AND BOARD MEMBERS. ALL CONFLICTS OF INTERESTS ARE DISCLOSED AND
THE RESPECTIVE MEMBER RECUSES HIM/HERSELF FROM THE DISCUSSION AND VOTING.
ALL ACTIONS ARE RECORDED IN THE MINUTES OF THE MEETING(S) DURING WHICH THE
ISSUE IS DISCUSSED AND DECIDED.

FORM 990, PART VI, SECTION B, LINE 15:

THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM PARTICIPATES IN THE SALARY
AND BENEFITS SURVEY THAT IS CONDUCTED ANNUALLY BY THE COUNCIL ON
FOUNDATIONS. SALARY LEVELS OF ALL STAFF MEMBERS ARE COMPARED TO SALARY
LEVELS OF OUR PEERS IN OUR ASSET SIZE. THE EXECUTIVE AND FINANCE
COMMITTEES APPROVE THE BUDGET WHICH INCLUDES ALL STAFF SALARIES AND
FORWARDS ON TO THE FULL BOARD FOR THEIR APPROVAL.

FORM 990, PART VI, SECTION C, LINE 19:

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

Schedule O (Form 990 or 990-EZ) 2020

| | | | |
|--------------------------|--|--------------------------------|------------|
| Name of the organization | THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM | Employer identification number | 63-1209631 |
|--------------------------|--|--------------------------------|------------|

UPON REQUEST, THE ORGANIZATION WILL MAKE AVAILABLE COPIES OF GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY TO THE PUBLIC. THE FINANCIAL STATEMENTS AND IRS FORMS 990 AND 990-T ARE POSTED TO THE ORGANIZATION'S WEBSITE.

FORM 990, PART X, LINE 25:

AGENCY ENDOWMENT FUNDS WERE RECLASSIFIED FROM FUND BALANCE TO LIABILITIES TO BE CONSISTENT WITH THE AUDITED FINANCIAL STATEMENTS.

FORM 990, PART VIII, LINE 1E

THE ORGANIZATION RECEIVED A GRANT FROM THE PAYCHECK PROTECTION PROGRAM IN THE AMOUNT OF \$234,800 TO BE USED FOR PAYROLL EXPENSES, MORTGAGE INTEREST, COMMERCIAL RENT OR UTILITIES. UNDER GUIDANCE OF THE AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS, THE GRANT FUNDS ARE TO BE RECOGNIZED AS INCOME ONCE ALL CONDITIONS OF THE GRANT ARE SUBSTANTIALLY MET OR EXPLICITLY WAIVED. AT DECEMBER 31, 2020, THE ORGANIZATION HAD SUBSTANTIALLY MET ALL CONDITIONS OF THE GRANT AND RECORDED THE PROCEEDS AS GRANT INCOME ON THE INCOME STATEMENT.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

| | |
|--|-------------|
| GAIN/(LOSS) ON INTEREST IN PERPETUAL TRUST | 875,318. |
| ACTUARIAL GAIN (LOSS) ON ANNUITY OBLIGATIONS | -53,707. |
| AGENCY ENDOWMENT CURRENT YEAR ACTIVITY RECORDED FOR TAX NOT ON BOOKS | -1,067,069. |
| TOTAL TO FORM 990, PART XI, LINE 9 | -245,458. |

FORM 990, PART XII, LINE 2C:

Name of the organization **THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM**

Employer identification number
63-1209631

**THE ORGANIZATION MADE NO CHANGES TO ITS OVERSIGHT PROCESS OR SELECTION
PROCESS DURING THE TAX YEAR.**

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Name of the organization **THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM** Employer identification number **63-1209631**

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

| (a) Name, address, and EIN (if applicable) of disregarded entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Total income | (e) End-of-year assets | (f) Direct controlling entity |
|--|-------------------------|---|---------------------|---------------------------|-------------------------------------|
| | | | | | |
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Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Exempt Code section | (e) Public charity status (if section 501(c)(3)) | (f) Direct controlling entity | (g) Section 512(b)(13) controlled entity? | |
|--|---|---|-------------------------------|---|---------------------------------------|--|----|
| | | | | | | Yes | No |
| CHARITABLE REAL ESTATE FOUNDATION - 20-1560119, 2100 FIRST AVENUE NORTH, BIRMINGHAM, AL 35203 | ASSISTING DONORS WITH DONATIONS OF REAL PROPERTY | ALABAMA | 501(C)3 | LINE 12A, I | COMMUNITY FOUNDATION OF GREATER | X | |
| THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM - TRUST - 63-6019864, 2100 FIRST AVENUE NORTH, BIRMINGHAM, AL 35203 | TRUST | ALABAMA | 501(C)3 | 170(B)(A)(VI) | N/A | | X |
| | | | | | | | |
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| | | | | | | | |

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

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SEE PART VII FOR CONTINUATIONS

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

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

| | Yes | No |
|--|-----------|----|
| 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? | | |
| a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity | 1a | X |
| b Gift, grant, or capital contribution to related organization(s) | 1b | X |
| c Gift, grant, or capital contribution from related organization(s) | 1c | X |
| d Loans or loan guarantees to or for related organization(s) | 1d | X |
| e Loans or loan guarantees by related organization(s) | 1e | X |
| f Dividends from related organization(s) | 1f | X |
| g Sale of assets to related organization(s) | 1g | X |
| h Purchase of assets from related organization(s) | 1h | X |
| i Exchange of assets with related organization(s) | 1i | X |
| j Lease of facilities, equipment, or other assets to related organization(s) | 1j | X |
| k Lease of facilities, equipment, or other assets from related organization(s) | 1k | X |
| l Performance of services or membership or fundraising solicitations for related organization(s) | 1l | X |
| m Performance of services or membership or fundraising solicitations by related organization(s) | 1m | X |
| n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) | 1n | X |
| o Sharing of paid employees with related organization(s) | 1o | X |
| p Reimbursement paid to related organization(s) for expenses | 1p | X |
| q Reimbursement paid by related organization(s) for expenses | 1q | X |
| r Other transfer of cash or property to related organization(s) | 1r | X |
| s Other transfer of cash or property from related organization(s) | 1s | 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 related organization | (b) Transaction type (a-s) | (c) Amount involved | (d) Method of determining amount involved |
|---------------------------------------|----------------------------------|------------------------|--|
| (1) CHARITABLE REAL ESTATE FOUNDATION | C | 272,234. | CASH |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |

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

[illegible]

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:

NAME OF RELATED ORGANIZATION:

CHARITABLE REAL ESTATE FOUNDATION

DIRECT CONTROLLING ENTITY: COMMUNITY FOUNDATION OF GREATER BIRMINGHAM