



LET'S THRIVE TOGETHER



TAX RETURN

We sincerely appreciate the opportunity to serve you. If you have any questions regarding the enclosed, please do not hesitate to call.

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

DECEMBER 31, 2022

PREPARED FOR:

THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM
2100 1ST AVENUE NORTH 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:

RETURN MUST BE MAILED ON OR BEFORE:

SPECIAL INSTRUCTIONS:

THIS COPY OF THE RETURN IS PROVIDED FOR STATE FILING PURPOSES.

TAX RETURN FILING INSTRUCTIONS

FORM 990-T

FOR THE YEAR ENDING

DECEMBER 31, 2022

PREPARED FOR:

THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM
2100 1ST AVENUE NORTH 700
BIRMINGHAM, AL 35203

PREPARED BY:

WARREN AVERETT, LLC
2500 ACTON ROAD
BIRMINGHAM, AL 35243

AMOUNT DUE OR REFUND:

OVERPAYMENT OF \$10,188. THE ENTIRE OVERPAYMENT HAS BEEN APPLIED TO
THE ESTIMATED TAX PAYMENTS.

MAKE CHECK PAYABLE TO:

NO AMOUNT IS DUE.

MAIL TAX RETURN AND CHECK (IF APPLICABLE) TO:

DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE CENTER
OGDEN, UT 84201-0027

RETURN MUST BE MAILED ON OR BEFORE:

NOVEMBER 15, 2023

SPECIAL INSTRUCTIONS:

THE RETURN SHOULD BE SIGNED AND DATED.

IRS e-file Signature Authorization for a Tax Exempt Entity

Form 8879-TE

For calendar year 2022, or fiscal year beginning _____, 2022, and ending _____, 20__

2022

Department of the Treasury Internal Revenue Service

Do not send to the IRS. Keep for your records.

Go to www.irs.gov/Form8879TE for the latest information.

Name of filer THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM

EIN or SSN ** - *** 9631

Name and title of officer or person subject to tax CHRISTOPHER NANNI PRESIDENT & CEO

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a 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, 7b, 8b, 9b, or 10b, 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.

Table with 2 columns: Line number and description, and Amount. Includes rows for Form 990, Form 990-EZ, Form 1120-POL, Form 990-PF, Form 8868, Form 990-T, Form 4720, Form 5227, Form 5330, and Form 8038-CP.

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

Under penalties of perjury, I declare that [X] I am an officer of the above entity or [] I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2022 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete.

PIN: check one box only

[X] I authorize WARREN AVERETT, LLC to enter my PIN 35243. Enter five numbers, but do not enter all zeros.

as my signature on the tax year 2022 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 entity, I will enter my PIN as my signature on the tax year 2022 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.

63633418995

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2022 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 10/11/23

ERO Must Retain This Form - See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8879-TE (2022)

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

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.

2022

Open to Public Inspection

A For the 2022 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM		D Employer identification number ** - ***9631
	Doing business as		E Telephone number 205-327-3800
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	2100 1ST AVENUE NORTH		G Gross receipts \$ 229,601,075.
	City 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		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> 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	20
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	20
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	20
	6 Total number of volunteers (estimate if necessary)	6	82
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	19,981.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	12,362.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	30,452,221.	35,995,398.
	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)	19,194,222.	12,125,477.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	41,149.	65,422.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	49,687,592.	48,186,297.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	23,415,173.	24,484,012.
	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)	1,618,426.	1,739,919.
	b Total fundraising expenses (Part IX, column (D), line 25)	0.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,330,324.	
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,457,820.	2,811,089.
19 Revenue less expenses. Subtract line 18 from line 12	26,491,419.	29,035,020.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	23,196,173.	19,151,277.
	21 Total liabilities (Part X, line 26)	Beginning of Current Year	End of Year
	22 Net assets or fund balances. Subtract line 21 from line 20	299,631,425.	266,608,513.
		18,774,718.	18,910,966.
		280,856,707.	247,697,547.

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				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	MEGAN RANDOLPH		10/11/23	<input checked="" type="checkbox"/>	P00989558
Preparer Use Only	Firm's name	Firm's EIN			
	WARREN AVERETT, LLC	** - ***4437			
	Firm's address	Phone no.			
	2500 ACTON ROAD BIRMINGHAM, AL 35243	205-979-4100			

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

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM

Form 990 (2022)

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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

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

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

4a (Code:) (Expenses \$ 22,693,951. including grants of \$ 20,763,219.) (Revenue \$ 0.) 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 \$ 4,072,698. including grants of \$ 3,720,793.) (Revenue \$ 0.) 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 OVERCOMING PERSISTENT POVERTY; BUILDING THRIVING COMMUNITIES; ECONOMIC OPPORTUNITY FOR ALL; REGIONAL COOPERATION; AND EQUITY AND INCLUSION.

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 26,766,649.

**THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM**

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> ? See instructions	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 Rev. Proc. 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> See instructions		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 (2022)

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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 the 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 line 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 on Schedule O for Part VI, lines 11b and 19?	38 X	

Note: All Form 990 filers are required to complete Schedule O

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	23
b Enter the number of Forms W-2G included on 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

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		20
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	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)?		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?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
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?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	X	
d	If "Yes," indicate the number of Forms 8282 filed during the year		4
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	N/A	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	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
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		N/A
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		N/A
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	N/A	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	N/A	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	N/A	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.		N/A
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		
c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.		X
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.		N/A

**THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM**

Form 990 (2022)

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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

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 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.	20	
b	Enter the number of voting members included on line 1a, above, who are independent	20	
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 on 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 on 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 on 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
CHRIS LUKETIC - 205-327-3815
2100 1ST AVENUE N., STE 700, BIRMINGHAM, AL 35203

THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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			191,031.	0.	33,898.	
(2) CHRIS LUKETIC CFO (BEGINNING IN 2022)	40.00 0.00			X			88,683.	0.	32,374.	
(3) TERRI EPTING CFO (ENDING IN 2022)	40.00 0.00			X			64,584.	0.	5,436.	
(4) LORA BLALOCK VICE PRESIDENT, DEVELOPMENT	40.00 0.00				X		110,337.	0.	19,156.	
(5) GUS HEARD-HUGHES VICE PRESIDENT, PROGRAMS	40.00 0.00				X		100,111.	0.	22,323.	
(6) DANIEL COLEMAN DIRECTOR	1.00 0.00	X					0.	0.	0.	
(7) GREGORY P. BUTRUS DIRECTOR	1.00 0.00	X					0.	0.	0.	
(8) RUFFNER PAGE DIRECTOR	1.00 0.00	X					0.	0.	0.	
(9) DAVID GRAY DIRECTOR	1.00 0.00	X					0.	0.	0.	
(10) BRIAN HAMILTON DIRECTOR	1.00 0.00	X					0.	0.	0.	
(11) KATE R. DANELLA DIRECTOR	1.00 0.00	X					0.	0.	0.	
(12) JUDGE WILLIAM HEREFORD DIRECTOR	1.00 0.00	X					0.	0.	0.	
(13) SHEGUN OTULANA DIRECTOR	1.00 0.00	X					0.	0.	0.	
(14) NANCY GOECKE DIRECTOR	1.00 0.00	X					0.	0.	0.	
(15) SUSAN MATLOCK DIRECTOR	1.00 0.00	X					0.	0.	0.	
(16) SANJAY SINGH DIRECTOR	1.00 0.00	X					0.	0.	0.	
(17) VIVIAN MORA DIRECTOR	1.00 0.00	X					0.	0.	0.	

THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM

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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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) JARED WEINSTEIN DIRECTOR	1.00 0.00	X						0.	0.	0.
(19) MECHELLE WILDER DIRECTOR	1.00 0.00	X						0.	0.	0.
(20) LISSA TYSON DIRECTOR	1.00 0.00	X						0.	0.	0.
(21) EDGAR MARX, JR. DIRECTOR	1.00 0.00	X						0.	0.	0.
(22) CATHY WRIGHT DIRECTOR	1.00 0.00	X						0.	0.	0.
(23) MYLA CALHOUN DIRECTOR	1.00 0.00	X						0.	0.	0.
(24) DELYNN ZELL DIRECTOR	1.00 0.00	X						0.	0.	0.
(25) SELWYN VICKERS DIRECTOR	1.00 0.00	X						0.	0.	0.
1b Subtotal								554,746.	0.	113,187.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								554,746.	0.	113,187.

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 3

	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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	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	14,221.				
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	35,981,177.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 21,095,080.				
	h Total. Add lines 1a-1f			35,995,398.			
Program Service Revenue	2 a _____	Business Code					
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		3,713,275.			3713275.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties		19,981.		19,981.		
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses ...	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	189,826,980.			
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	181,414,778.				
	c Gain or (loss)	7c	8,412,202.				
	d Net gain or (loss)			8,412,202.		8412202.	
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	11 a MISCELLANEOUS INCOME	Business Code	900099	45,441.		45,441.	
	b _____						
	c _____						
	d All other revenue						
	e Total. Add lines 11a-11d			45,441.			
12 Total revenue. See instructions			48,186,297.	0.	19,981.	12170918.	

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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	24,403,970.	24,403,970.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	80,042.	80,042.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	344,298.	137,719.	68,860.	137,719.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,021,608.	371,076.	267,090.	383,442.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	61,579.	16,958.	40,237.	4,384.
9 Other employee benefits	214,663.	65,988.	104,199.	44,476.
10 Payroll taxes	97,771.	36,352.	23,587.	37,832.
11 Fees for services (nonemployees):				
a Management				
b Legal	4,316.	4,316.		
c Accounting	56,974.	3,456.	35,679.	17,839.
d Lobbying	43,266.	43,266.		
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	892,413.	267,724.	258,800.	365,889.
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	80,282.	7,631.	3,763.	68,888.
12 Advertising and promotion	16,037.			16,037.
13 Office expenses	38,506.	13,606.	8,909.	15,991.
14 Information technology	126,537.	40,537.	23,058.	62,942.
15 Royalties				
16 Occupancy	115,691.	43,083.	28,482.	44,126.
17 Travel	5,588.	3,832.	1,756.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	6,493.	1,846.	2,274.	2,373.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	52,339.	16,588.	14,642.	21,109.
23 Insurance	24,842.	8,492.	6,875.	9,475.
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 <u>INITIATIVES/GRANT CYCLE</u>	1,187,951.	1,187,163.		788.
b <u>SPONSORSHIP/DONOR RELAT</u>	40,331.	1,145.	250.	38,936.
c <u>DUES/SUBSCRIPTIONS</u>	36,480.	1,133.	27,421.	7,926.
d <u>MARKETING MATERIALS/PUB</u>	31,699.	200.		31,499.
e All other expenses	51,344.	10,526.	22,165.	18,653.
25 Total functional expenses. Add lines 1 through 24e	29,035,020.	26,766,649.	938,047.	1,330,324.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

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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	5,622,258.	2	11,075,363.
	3 Pledges and grants receivable, net	236,038.	3	1,068,001.
	4 Accounts receivable, net		4	27,576.
	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	46,474.	9	84,750.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 286,735.		
	b Less: accumulated depreciation	10b 269,124.	14,571.	10c 17,611.
	11 Investments - publicly traded securities	275,300,004.	11	238,304,959.
	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	18,412,080.	15	16,030,253.
16 Total assets. Add lines 1 through 15 (must equal line 33)	299,631,425.	16	266,608,513.	
Liabilities	17 Accounts payable and accrued expenses	68,811.	17	2,419,456.
	18 Grants payable	3,196,867.	18	3,385,493.
	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	15,509,040.	25	13,106,017.
	26 Total liabilities. Add lines 17 through 25	18,774,718.	26	18,910,966.
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	255,335,841.	27	225,123,877.
	28 Net assets with donor restrictions	25,520,866.	28	22,573,670.
	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	280,856,707.	32	247,697,547.
	33 Total liabilities and net assets/fund balances	299,631,425.	33	266,608,513.

**THE COMMUNITY FOUNDATION OF GREATER
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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

1 Total revenue (must equal Part VIII, column (A), line 12)	1	48,186,297.
2 Total expenses (must equal Part IX, column (A), line 25)	2	29,035,020.
3 Revenue less expenses. Subtract line 2 from line 1	3	19,151,277.
4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	280,856,707.
5 Net unrealized gains (losses) on investments	5	-52,438,311.
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	127,873.
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	247,697,546.

Part XII Financial Statements and Reporting

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

		Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
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			
b Were the organization's financial statements audited by an independent accountant?	2b	X	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	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		

THE COMMUNITY FOUNDATION OF GREATER
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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) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	22430319.	17624095.	26167948.	30452221.	35995398.	132669981
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	22430319.	17624095.	26167948.	30452221.	35995398.	132669981
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)						25146731.
6 Public support. Subtract line 5 from line 4.						107523250

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4	22430319.	17624095.	26167948.	30452221.	35995398.	132669981
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	3742155.	4764473.	4213368.	5053265.	3733256.	21506517.
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.)	7,250.	6,500.	7,258.	17,335.	45,441.	83,784.
11 Total support. Add lines 7 through 10						154260282
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 2022 (line 6, column (f), divided by line 11, column (f))	14	69.70	%
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	72.14	%
16a 33 1/3% support test - 2022. 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 - 2021. 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 - 2022. 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 - 2021. 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"/>		

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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) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(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) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(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 on 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 2022 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2021 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2021 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2022. 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 - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked 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).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</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 on 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 on 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 on lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described on line 11a above?		
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
11a		
11b		
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? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove 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.</i>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
1		
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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
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?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described on 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

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

THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM

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	(A) Prior Year	(B) Current Year (optional)
1 Adjusted net income for prior year (from Section A, line 8, column A)	1	Current Year
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).		

THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM

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 2022 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-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, 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 2022. 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 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Attach to Form 990 or Form 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Name of the organization

**THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM**

Employer identification number

**** - *** 9631**

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

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

General Rule

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

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ _____

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

Name of organization THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM	Employer identification number ** - ***9631
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>750,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ <u>967,408.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ <u>4,110,777.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ <u>7,037,991.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ <u>9,149,399.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM	Employer identification number ** - ***9631
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>2</u>	230 SHARES OF CCBCU	\$ <u>967,408.</u>	<u>12/31/22</u>
<u>4</u>	967 SHARES OF MGV	\$ <u>98,769.</u>	<u>12/23/22</u>
<u>4</u>	500 SHARES OF VOO	\$ <u>177,155.</u>	<u>12/16/22</u>
<u>4</u>	4903 SHARES OF VOO	\$ <u>1,724,851.</u>	<u>12/19/22</u>
<u>4</u>	4702 SHARES OF VOO	\$ <u>2,036,389.</u>	<u>01/12/22</u>
<u>4</u>	27558 SHARES OF SCHX	\$ <u>2,929,967.</u>	<u>02/16/22</u>

Name of organization THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM	Employer identification number ** - ***9631
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
5	1662 SHARES OF AMX	\$ 58,177.	03/11/22
5	1143 SHARES OF FKGRX	\$ 141,823.	03/07/22
5	2115 SHARES OF KMI	\$ 2,655,340.	05/05/22
5	10 SHARES OF BRK-A	\$ 5,965,374.	03/11/22
		\$ _____	_____
		\$ _____	_____

Name of organization THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM	Employer identification number ** - *** 9631
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

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	** - *** 9631
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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-.

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)	43,266.													
b Total lobbying expenditures to influence a legislative body (direct lobbying)														
c Total lobbying expenditures (add lines 1a and 1b)	43,266.													
d Other exempt purpose expenditures	28,991,754.													
e Total exempt purpose expenditures (add lines 1c and 1d)	29,035,020.													
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: 30%;">If the amount on line 1e, column (a) or (b) is:</th> <th>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) 2019	(b) 2020	(c) 2021	(d) 2022	(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	169,953.	22,738.	43,024.	43,266.	278,981.
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	93,681.	22,738.	43,000.	43,266.	202,685.

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)).

	(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 expenditures 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

2022

Open to Public Inspection

Name of the organization THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM Employer identification number ** - *** 9631

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

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

Form with multiple questions (1-9) regarding conservation easements, including checkboxes for various purposes, a table for tracking easements at the end of the tax year, and yes/no questions about monitoring and reporting.

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.

Form with questions (1a, 1b, 2) regarding the reporting of art and historical treasures, including fields for revenue and asset values.

**THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM**

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	136,976.
(2) RECEIVABLE FROM SPLIT INTERESTS	4,427,394.
(3) INTEREST IN PERPETUAL TRUSTS	11,327,757.
(4) CHARITABLE GIFT ANNUITIES	138,126.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	16,030,253.

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	25,093.
(3) ACCRUED VACATION	44,275.
(4) OTHER LIABILITES	750.
(5) FUNDS HELD AS AGENCY ENDOWMENTS	12,900,899.
(6) UNEARNED REVENUE	135,000.
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	13,106,017.

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 ...

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	-5,819,635.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	-49,354,523.	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	-2,407,296.	
e	Add lines 2a through 2d	2e		-51,761,819.
3	Subtract line 2e from line 1	3		45,942,184.
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	2,244,113.	
c	Add lines 4a and 4b	4c		2,244,113.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5		48,186,297.

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	27,513,557.
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	17,469.	
e	Add lines 2a through 2d	2e		17,469.
3	Subtract line 2e from line 1	3		27,496,088.
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	1,538,932.	
c	Add lines 4a and 4b	4c		1,538,932.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5		29,035,020.

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, 2022, OR 2021, THAT IT WOULD BE UNABLE TO SUBSTANTIATE. THE FOUNDATION

Part XIII Supplemental Information (continued)

HAS FILED ITS TAX RETURNS THROUGH DECEMBER 31, 2021.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

GAIN/(LOSS) ON INTEREST IN PERPETUAL TRUST	-2,237,640.
ACTUARIAL GAIN ON ANNUITY OBLIGATION	-169,656.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	-2,407,296.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

REVENUE ON RETURN NOT ON AUDIT RELATED TO AGENCY ENDOWMENT FUNDS	1,265,736.
OTHER GAIN/LOSS INCLUDED AS EXPENSE ON AUDIT	821,814.
INCOME REPORTED BY CHARITABLE REAL ESTATE FOUNDATION EIN 20-1560119	156,563.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	2,244,113.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

EXPENSES REPORTED BY CHARITABLE REAL ESTATE FOUNDATION EIN 20-1560119	17,469.
--	---------

PART XII, LINE 4B - OTHER ADJUSTMENTS:

EXPENSES ON RETURN NOT ON AUDIT RELATED TO AGENCY ENDOWMENT FUNDS	717,118.
OTHER GAIN/LOSS INCLUDED AS REVENUE ON RETURN	821,814.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	1,538,932.

**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

2022

**Open to Public
Inspection**

Name of the organization **THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM** Employer identification number **** - *** 9631**

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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
STRIVE INTERNATIONAL 205 E 122ND ST NEW YORK, NY 10035-2124	** - *** 5679	501(C)(3)	75,000.	0.			ECONOMIC OPPORTUNITY
PROTECT OUR WINTERS 4676 BROADWAY ST. BOULDER, CO 80304	** - *** 4909	501(C)(3)	10,200.	0.			GENERAL SUPPORT
RED MOUNTAIN MAKERS 810 4TH AVENUE NORTH BIRMINGHAM, AL 35203	** - *** 4591	501(C)(3)	20,000.	0.			THRIVING COMMUNITIES
WOMEN UNDER CONSTRUCTION NETWORK 429 GREEN SPRINGS HIGHWAY, 161-244 BIRMINGHAM, AL 35209	** - *** 1835	501(C)(3)	8,000.	0.			PERSISTENT POVERTY
NORTHEAST ALABAMA COMMUNITY COLLEGE - PO BOX 159 - RAINSVILLE, AL 35986	** - *** 4999	501(C)(3)	20,000.	0.			SCHOLARSHIPS
RED MOUNTAIN GREENWAY AND RECREATIONAL AREA COMMISSION - 277 LYON LANE - BIRMINGHAM, AL 35211	** - *** 1579	501(C)(3)	600,000.	0.			SPECIAL PROGRAMS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 380.

3 Enter total number of other organizations listed in the line 1 table 25.

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

Schedule I (Form 990) 2022

THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM

Schedule I (Form 990)

** - ***9631

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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DIANE'S HEART P.O. BOX 382164 BIRMINGHAM, AL 35238	**-***2981	501(C)(3)	8,000.	0.			PERSISTENT POVERTY
INNOVATE BIRMINGHAM 1500 1ST AVE N UNIT 73D BIRMINGHAM, AL 35203	**-***7975	501(C)(3)	25,000.	0.			REGIONAL COOPERATION
HUEYTOWN HARVEST FARMERS MARKET 2066 HIGH SCHOOL ROAD HUEYTOWN, AL 35023	**-***4039	501(C)(3)	8,000.	0.			THRIVING COMMUNITIES
KLEIN ARTS & CULTURE P.O. BOX 34 HARPERVILLE, AL 35078	**-***0605	501(C)(3)	15,000.	0.			THRIVING COMMUNITIES
HIGHWAY 280 PUBLIC ROAD COOPERATIVE DISTRICT - 2850 19TH STREET SOUTH - BIRMINGHAM, AL 35209	**-***6459	501(C)(3)	50,000.	0.			REGIONAL COOPERATION
ALABAMA INTERFAITH REFUGEE PARTNERSHIP INC - 2641 PADEN PL - VESTAVIA, AL 35226-2839	**-***0964	501(C)(3)	13,000.	0.			PERSISTENT POVERTY
VOLUNTEER FLORIDA FOUNDATION 1545 RAYMOND DIEHL RD. STE. 250 TALLAHASSEE, FL 32308	**-***3168	501(C)(3)	53,000.	0.			SPECIAL PORGRAMS
THE BILL CRAWFORD EDUCATIONAL FOUNDATION OF THE HOMEWOOD ROTARY CLUB - PO BOX 19333 - BIRMINGHAM, AL 35219	**-***7473	501(C)(3)	6,000.	0.			GENERAL SUPPORT
NATHIFA DANCE COMPANY & OUTREACH, INC. - 5277 DRESDEN RD - IRONDALE, AL 35210	**-***4398	501(C)(3)	10,000.	0.			SPECIAL PROGRAMS

Schedule I (Form 990)

THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM

Schedule I (Form 990)

** - ***9631

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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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST. LUKE'S EPISCOPAL CHURCH 3736 MONTROSE ROAD BIRMINGHAM, AL 35213	**-***6902	CHURCH/SYN	137,654.	0.			GENERAL SUPPORT + SPECIAL PROGRAMS + SCHOLARSHIPS
BANK OF AMERICA CHARITABLE GIFT FUND - 100 FEDERAL STREET MA1-225-04-02 - BOSTON, MA 02110	**-***0342	501(C)(3)	105,000.	0.			SPECIAL PROGRAMS
FOCUS/FELLOWSHIP OF CHRISTIANS IN UNIVERSITIES AND SCHOOLS, INC. - PO BOX 1027 - NEW CANAAN, CT 06840	**-***0830	501(C)(3)	15,000.	0.			GENERAL SUPPORT
ALABAMA APPLESEED CENTER FOR LAW & JUSTICE - 2 OFFICE PARK CIRCLE #10 - BIRMINGHAM, AL 35223	**-***7437	501(C)(3)	35,500.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
FRIENDS OF UNITED HATZALAH 442 5TH AVE. #1866 NEW YORK, NY 10018	**-***3002	501(C)(3)	10,000.	0.			GENERAL SUPPORT
AMERICAN CANCER SOCIETY 1100 IRELAND WAY STE 300 BIRMINGHAM, AL 35205-7014	**-***8491	501(C)(3)	34,200.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
MARCH OF DIMES-AL 3500 BLUE LAKE DR. STE. 198 BIRMINGHAM, AL 35243	**-***6366	501(C)(3)	7,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
ALBERT SCHWEITZER FELLOWSHIP - ALABAMA CHAPTER - PO BOX 660412 - VESTAVIA, AL 35266	**-***2786	501(C)(3)	25,500.	0.			GENERAL SUPPORT
COVENANT HOUSE TEXAS 1111 LOVETT BOULEVARD HOUSTON, TX 77006	**-***5416	501(C)(3)	10,000.	0.			SPECIAL PROGRAMS

Schedule I (Form 990)

THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM

Schedule I (Form 990)

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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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SALVATION ARMY WORLD SERVICES OFFICE - 615 SLATERS LN - ALEXANDRIA, VA 22314-1112	**-***3701	501(C)(3)	115,404.	0.			SPECIAL PROGRAMS
ALZHEIMER'S ASSOCIATION 225 N MICHIGAN AVE 17TH FL CHICAGO, IL 60601-7652	**-***9601	501(C)(3)	11,428.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
DOCTORS WITHOUT BORDERS USA PO BOX 5023 HAGERSTOWN, MD 21741-5030	**-***3452	501(C)(3)	47,164.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
TEACH FOR AMERICA-ALABAMA PO BOX 1054 BIRMINGHAM, AL 35201	**-***1913	501(C)(3)	23,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
HOLY FAMILY CRISTO REY CATHOLIC HIGH SCHOOL - PO BOX 19577 - HOMEWOOD, AL 35219	**-***1859	501(C)(3)	92,187.	0.			ECONOMIC OPPORTUNITY + GENERAL SUPPORT + SPECIAL PORGRAMS
VINEYARD FAMILY SERVICES OF CENTRAL AL, INC. - PO BOX 2458 - ALABASTER, AL 35007	**-***2029	501(C)(3)	25,000.	0.			PERSISTENT POVERTY
AMERICAN HEART ASSOCIATION 1818 PATTERSON ST. NASHVILLE, TN 37203	**-***3797	501(C)(3)	33,500.	0.			GENERAL SUPPORT
HIAS 1300 SPRING ST, STE 500, SILVER SPRING,, MD 20910	**-***3307	501(C)(3)	10,000.	0.			SPECIAL PROGRAMS
LEUKEMIA & LYMPHOMA SOCIETY PO BOX 22324 NEW YORK, NY 10087	**-***4916	501(C)(3)	9,975.	0.			SPECIAL PROGRAMS

Schedule I (Form 990)

THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM

Schedule I (Form 990)

** - ***9631

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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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CORNELL UNIVERSITY 130 E SENECA ST STE 400 ITHACA, NY 14850	**-***2082	501(C)(3)	11,000.	0.			SPECIAL PROGRAMS
TRIUMPHANT KINGDOM BUILDERS COMMUNITY - 2341 PEARSON AVE SUITE 206 - BIRMINGHAM, AL 35211	**-***2352	501(C)(3)	8,000.	0.			ECONOMIC OPPORTUNITY
MUSIC OPPORTUNITY PROGRAM FOUNDATION - 2316 7TH AVE N - BIRMINGHAM, AL 35203	**-***3074	501(C)(3)	30,354.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
REV BIRMINGHAM P.O. BOX 320637 BIRMINGHAM, AL 35232-0637	**-***3511	501(C)(3)	83,420.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
IMPACT AMERICA 601 BEACON PKWY W STE 102 HOMEWOOD, AL 35209	**-***0212	501(C)(3)	72,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
THE BRIDGE ACADEMY & COMMUNITY CENTER - 578 OLIVE STREET - COATESVILLE, PA 19335	**-***1049	501(C)(3)	13,272.	0.			SPECIAL PROGRAMS
MITCHELL'S PLACE 4778 OVERTON ROAD IRONDALE, AL 35210	**-***6421	501(C)(3)	6,750.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
CRIMSON TIDE FOUNDATION PO BOX 870343 TUSCALOOSA, AL 35487-0343	**-***5023	501(C)(3)	50,550.	0.			GENERAL SUPPORT
COMMUNITY FURNITURE BANK 219 DISTRIBUTION DRIVE BIRMINGHAM, AL 35209	**-***1201	501(C)(3)	11,000.	0.			GENERAL SUPPORT

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDS OF THE MARKET, INC. 1130 22ND ST SO, SUITE 3500 BIRMINGHAM, AL 35205	**-***4172	501(C)(3)	7,500.	0.			GENERAL SUPPORT
NATIONAL CONFERENCE FOR COMMUNITY AND JUSTICE OF ALABAMA - PO BOX 383022 - BIRMINGHAM, AL 35238-3022	**-***9403	501(C)(3)	7,500.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
STAIR OF BIRMINGHAM 3703 5TH AVENUE SOUTH SUITE 400 BIRMINGHAM, AL 35222	**-***1638	501(C)(3)	11,600.	0.			GENERAL SUPPORT
CAMP WINNATASKA PO BOX 59514 BIRMINGHAM, AL 35259	**-***1145	501(C)(3)	274,366.	0.			GENERAL SUPPORT
WOMEN OF MY HOPE, INC. PO BOX 73 MADISONVILLE, LA 70447	**-***9117	501(C)(3)	7,200.	0.			GENERAL SUPPORT
GENERATION ONE PO BOX 8280 HOUSTON, TX 77288	**-***2170	501(C)(3)	15,000.	0.			GENERAL SUPPORT
ALABAMA SPAY NEUTER CLINIC INCORPORATED - 2721 CRESTWOOD BLVD - BIRMINGHAM, AL 35210	**-***9714	501(C)(3)	10,000.	0.			GENERAL SUPPORT
LAWRENCEVILLE SCHOOL P.O. BOX 6008 LAWRENCEVILLE, NJ 08648	**-***4503	501(C)(3)	6,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
CHILDREN'S HOSPITAL OF PHILADELPHIA - 3401 CIVIC CENTER BLVD - PHILADELPHIA, PA 19104-4319	**-***2166	501(C)(3)	10,000.	0.			SPECIAL PROGRAMS

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JUVENILE DIABETES RESEARCH FOUNDATION INTN'L - 200 VESEY ST. 28TH FLOOR - NEW YORK, NY 10281	**-***7729	501(C)(3)	52,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
FIRST PRESBYTERIAN CHURCH OF HIGHLANDS - P.O. BOX 548 - HIGHLANDS, NC 28741	**-***3377	CHURCH/SYN	25,000.	0.			GENERAL SUPPORT
VIRGINIA SAMFORD THEATRE/MAC 1116 26TH STREET SOUTH BIRMINGHAM, AL 35205-2414	**-***8513	501(C)(3)	40,470.	0.			GENERAL SUPPORT + SPECIAL PROGRAM
ALABAMA COUNCIL ON ECONOMIC EDUCATION - PO BOX 59288 - BIRMINGHAM, AL 35259-9288	**-***8024	501(C)(3)	25,000.	0.			SPECIAL PORGRAMS
COMMUNITY FOUNDATION FOR PALM BEACH AND MARTIN COUNTIES - 700 SOUTH DIXIE HIGHWAY, SUITE 200 - WEST PALM BEACH, FL 33401	**-***1875	501(C)(3)	10,000.	0.			GENERAL SUPPORT
OPERA BIRMINGHAM 3601 6TH AVE S BIRMINGHAM, AL 35222-2407	**-***7572	501(C)(3)	15,879.	0.			GENERAL SUPPORT + SPECIAL PROGRAMS + THRIVING COMMUNITIES
JEFFERSON STATE COMMUNITY COLLEGE FOUNDATION - PO BOX 94956 - BIRMINGHAM, AL 35220	**-***0697	501(C)(3)	76,667.	0.			SPECIAL PROGRAMS
BIRMINGHAM CHAMBER MUSIC SOCIETY 3820 REDMONT RD. BIRMINGHAM, AL 35213-2842	**-***1693	501(C)(3)	10,000.	0.			GENERAL SUPPORT
BIRMINGHAM MUSEUM OF ART 2000 REV ABRAHAM WOODS JR BLVD BIRMINGHAM, AL 35203	**-***5853	501(C)(3)	140,489.	0.			GENERAL SUPPORT + SPECIAL PROGRAMS + SCHOLARSHIPS

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UNIVERSITY OF MONTEVALLO FOUNDATION - STATION 6215 MERONEY HOUSE - MONTEVALLO, AL 35115	**-***9527	501(C)(3)	25,000.	0.			SPECIAL PROGRAMS
SYDA FOUNDATION P.O. BOX 600 SOUTH FALLSBURG, NY 12779-0600	**-***6445	501(C)(3)	15,000.	0.			GENERAL SUPPORT
UNIVERSITY OF CALIFORNIA SANTA CRUZ - 1156 HIGH STREET - SANTA CRUZ, CA 95064	**-***4590	501(C)(3)	20,000.	0.			SPECIAL PROGRAMS
GLENWOOD, INC. 150 GLENWOOD LANE BIRMINGHAM, AL 35242-5700	**-***6710	501(C)(3)	5,500.	0.			GENERAL SUPPORT
FRIENDS OF JEMISON PARK PO BOX 530813 BIRMINGHAM, AL 35253	**-***2902	501(C)(3)	43,500.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
BIG OAK RANCH BUSINESS OFFICE 250 JAKE MINTZ RD GADSDEN, AL 35905	**-***3017	501(C)(3)	23,467.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
ADDICTION PREVENTION COALITION 324 COMMONS DR HOMEWOOD, AL 35209	**-***9028	501(C)(3)	10,000.	0.			GENERAL SUPPORT
MOCKINGBIRD MINISTRIES INC. 100 WEST JEFFERSON STREET CHARLOTTESVILLE, VA 22902	**-***5226	501(C)(3)	7,000.	0.			GENERAL SUPPORT
PROJECT HORSESHOE FARM 1202 MAIN STREET GREENSBORO, AL 36744	**-***6439	501(C)(3)	35,000.	0.			GENERAL SUPPORT

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COMMUNITY OF HOPE HEALTH CLINIC P O BOX 177 PELHAM, AL 35124	**-***0338	501(C)(3)	30,000.	0.			THRIVING COMMUNITIES
CAHABA RIVERKEEPER 4650 OLD LOONEY MILL RD BIRMINGHAM, AL 35243	**-***3785	501(C)(3)	15,351.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
BIRMINGHAM EDUCATION FOUNDATION P.O. BOX 55357 BIRMINGHAM, AL 35255	**-***5144	501(C)(3)	106,721.	0.			GENERAL SUPPORT + SCHOLARSHIPS + SPECIAL PORGRAM + THRIVING COMMUNITIES
RED MOUNTAIN PARK FOUNDATION 283 LYON LANE BIRMINGHAM, AL 35211	**-***0740	501(C)(3)	37,150.	0.			GENERAL SUPPORT
FIRST SPIRITUAL SCIENCE CHURCH 3375 S. DAHLIA ST. DENVER, CO 80222	**-***8804	CHURCH/SYN	10,000.	0.			GENERAL SUPPORT
EAST LAKE INITIATIVE 6523 1ST AVE N BIRMINGHAM, AL 35206	**-***1412	501(C)(3)	40,000.	0.			PERSISTENT POVERTY
WELLHOUSE PO BOX 868 ODENVILLE, AL 35120	**-***3046	501(C)(3)	25,000.	0.			GENERAL SUPPORT
VENTURE FOR AMERICA 1420 WASHINGTON BLVD. DETROIT, MI 48226	**-***7904	501(C)(3)	55,000.	0.			GENERAL SUPPORT
COOSA RIVERKEEPER 102 CROFT ST #B BIRMINGHAM, AL 35242	**-***0200	501(C)(3)	20,351.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS

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WORLD CENTRAL KITCHEN 200 MASSACHUSETTS AVE NW 7TH FLOOR WASHINGTON, DC 20001	**-***1132	501(C)(3)	14,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
PRINCE OF PEACE CATHOLIC CHURCH 4600 PRESERVE PARKWAY HOOVER, AL 35226	**-***6615	501(C)(3)	20,000.	0.			GENERAL SUPPORT
WOODLAWN FOUNDATION, INC. 5529 1ST AVE S BIRMINGHAM, AL 35212	**-***1072	501(C)(3)	254,750.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
NEW AMERICAN PATHWAYS, INC. 2300 HENDERSON MILL RD., NE, SUITE ATLANTA, GA 30345	**-***0066	501(C)(3)	25,000.	0.			GENERAL SUPPORT
SIGHT SAVERS AMERICA 337 BUSINESS CIRCLE PELHAM, AL 35124	**-***8234	501(C)(3)	177,100.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
ALABAMA ARCHIVES & HISTORY FOUNDATION - 624 WASHINGTON AVE PO BOX 300100 - MONTGOMERY, AL 36130-0100	**-***7154	501(C)(3)	10,500.	0.			GENERAL SUPPORT
BUTLER COUNTY UNITED WAY 323 NORTH 3RD STREET HAMILTON, OH 45011	**-***4490	501(C)(3)	17,210.	0.			SPECIAL PROGRAMS
CINCINNATI CHILDREN'S HOSPITAL MEDICAL CENTER - PO BOX 5202 - CINCINNATI, OH 45201-5202	**-***3936	501(C)(3)	10,000.	0.			SPECIAL PORGRAMS
PARKINSON ASSOCIATION OF ALABAMA, INC. - P.O. BOX 590146 - BIRMINGHAM, AL 35259	**-***7418	501(C)(3)	49,001.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS

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M-POWER MINISTRIES, INC. P.O.BOX 321233 BIRMINGHAM, AL 35232	**-***9601	501(C)(3)	7,200.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
OHIO WESLEYAN UNIVERSITY 61 SOUTH SANDUSKY STREET DELAWARE, OH 43015	**-***9585	501(C)(3)	30,000.	0.			GENERAL SUPPORT + SPECIAL PROGRAMS + SCHOLARSHIPS
BUTTERFLY BRIDGE CHILDREN'S ADVOCACY CENTER - PO BOX 588 - CLANTON, AL 35046	**-***8713	501(C)(3)	101,500.	0.			SPECIAL PROGRAMS
TACO BELL FOUNDATION 1 GLEN BELL WAY IRVINE, CA 92618-3344	**-***3542	501(C)(3)	10,000.	0.			GENERAL SUPPORT
HABITAT FOR HUMANITY-GREATER INDY 3135 N. MERIDIAN STREET INDIANAPOLIS, IN 46208	**-***5910	501(C)(3)	6,000.	0.			GENERAL SUPPORT
SPANISH PEAKS COMMUNITY FOUNDATION PO BOX 161303 BIG SKY, MT 59716	**-***9310	501(C)(3)	10,000.	0.			SPECIAL PROGRAMS
UNIVERSITY OF MICHIGAN 2500 STUDENT ACTIVITIES BLDG 515 E. JEFFERSON ST - ANN ARBOR, MI 48109	**-***6309	501(C)(3)	30,000.	0.			SCHOLARSHIPS
MEDICAL COLLEGE OF WISCONSIN 8701 WATERTOWN PLANK ROAD MILWAUKEE, WI 53226	**-***6261	501(C)(3)	10,000.	0.			GENERAL SUPPORT
BIRMINGHAM BLACK RADIO MUSEUM 1623 12TH ST SOUTH BIRMINGHAM, AL 35205	**-***1470	501(C)(3)	8,000.	0.			SPECIAL PROGRAMS

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CHARGE SYNDROME FOUNDATION 318 HALF DAY RD #305 BUFFALO GROVE, IL 60089	**-***2150	501(C)(3)	11,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
WOMEN'S FOUNDATION OF ALABAMA 2201 5TH AVE SOUTH STE 110 BIRMINGHAM, AL 35233	**-***2468	501(C)(3)	27,500.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
EMERGENCY ASSISTANCE FOUNDATION, INC. - 3713 PINE STREET - JACKSONVILLE, FL 32205	**-***3056	501(C)(3)	9,000.	0.			SPECIAL PROGRAMS
BETTER BUSINESS BETTER COMMUNITIES RESEARCH INC - 800 25TH STREET ENSLEY - BIRMINGHAM, AL 35218	**-***0248	501(C)(3)	8,000.	0.			ECONOMIC OPPORTUNITY
BIRTHWELL PARTNERS 976 LINWOOD RD BIRMINGHAM, AL 35222	**-***4335	501(C)(3)	20,000.	0.			PERSISTENT POVERTY
RED BARN FOUNDATION 2700 BAILEY RD LEEDS, AL 35094	**-***3191	501(C)(3)	117,200.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
WORKFAITH BIRMINGHAM 750 MONTCLAIR RD BIRMINGHAM, AL 35213-1906	**-***6843	501(C)(3)	25,000.	0.			ECONOMIC OPPORTUNITY
PINKTOPPS, INC. 1931-A 3RD AVE. NORTH BESSEMER, AL 35020	**-***2353	501(C)(3)	8,000.	0.			EQUITY AND INCLUSION
JAR OF HOPE 631 LAKE AVENUE ASBURY PARK, NJ 07712	**-***4019	501(C)(3)	80,000.	0.			SPECIAL PROGRAMS

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WORLD GAMES 2022 BIRMINGHAM FOUNDATION - 950 22ND STREET NORTH SUITE 600 - BIRMINGHAM, AL 35203	**-***0311	501(C)(3)	150,000.	0.			GENERAL SUPPORT
SON OF A SAINT PO BOX 19205 NEW ORLEANS, LA 70119	**-***4558	501(C)(3)	10,500.	0.			GENERAL SUPPORT
ALABAMA SMALL BUSINESS DEVELOPMENT INITIATIVE - 1500 1ST AVE N, #12 - BIRMINGHAM, AL 35203	**-***9627	501(C)(3)	136,500.	0.			SPECIAL PORGRAMS
SPOOKSTOCK FOUNDATION 140B PURCELLVILLE GATEWAY DRIVE, NO PURCELLVILLE, VA 20132	**-***8783	501(C)(3)	20,000.	0.			SPECIAL PROGRAMS
NICK'S KIDS FOUNDATION 1130 UNIVERSITY BLVD SUITE B9-201 TUSCALOOSA, AL 35401	**-***0447	501(C)(3)	8,000.	0.			GENERAL SUPPORT
UNLESS U 737 CHESTNUT ST VESTAVIA HLS, AL 35216-1911	**-***5114	501(C)(3)	35,000.	0.			SPECIAL PORGRAMS
ROOTED MINISTRY PO BOX 43673 BIRMINGHAM, AL 35243	**-***6075	501(C)(3)	10,000.	0.			GENERAL SUPPORT
EAST LAKE ACADEMY INC PO BOX 590049 BIRMINGHAM, AL 35259	**-***6837	501(C)(3)	15,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
THE INSTITUTE FOR COMMUNITY, YOUTH & FAMILY SERVICES, INC. - 1143 1ST AVE S SUITE 232 - BIRMINGHAM, AL 35233	**-***0933	501(C)(3)	18,000.	0.			ECONOMIC OPPORTUNITY

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MWANA VILLAGES US INC 3360 DUNBROOKE DR MOUNTAIN BROOK, AL 35243	**-***8624	501(C)(3)	7,500.	0.			GENERAL SUPPORT
BUNDLES OF HOPE DIAPER BANK 1430 REVEREND ABRAHAM WOODS JR. BLV BIRMINGHAM, AL 35203	**-***4034	501(C)(3)	38,000.	0.			PERSISTENT POVERTY + SPECIAL PROGRAMS
ED FARM 1914 4TH AVE N #200 BIRMINGHAM, AL 35203	**-***5034	501(C)(3)	65,000.	0.			ECONOMIC OPPORTUNITY
ALABAMA COALITION FOR IMMIGRANT JUSTICE UNITED - 1826 6TH AVE S - BIRMINGHAM, AL 35210	**-***2872	501(C)(3)	40,000.	0.			EQUITY AND INCLUSION
VICTORY CUP INITIATIVE PO BOX 1806 WINTER PARK, FL 32792	**-***0599	501(C)(3)	25,000.	0.			GENERAL SUPPORT
ONE PLACE METRO ALABAMA FAMILY JUSTICE CENTER - P.O. BOX 59812 - BIRMINGHAM, AL 35259	**-***3750	501(C)(3)	75,766.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
A4ONE 174 OXMOOR ROAD BIRMINGHAM, AL 35209	**-***8523	501(C)(3)	10,000.	0.			GENERAL SUPPORT
ALAQEST COLLABORATIVE FOR EDUCATION - PO BOX 550241 - BIRMINGHAM, AL 35255	**-***6358	501(C)(3)	30,000.	0.			SPECIAL PROGRAMS
MASON MUSIC FOUNDATION 4129 N CAHABA DR VESTAVIA, AL 35243-5006	**-***3760	501(C)(3)	10,000.	0.			GENERAL SUPPORT

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UAB WOMEN'S CLUB 1720 2ND AVE SOUTH STE 1230 BIRMINGHAM, AL 35294	**-***5990	501(C)(3)	5,643.	0.			SCHOLARSHIPS
ALABAMA SCHOOL OF FINE ARTS FOUNDATION - 1800 8TH AVE NORTH - BIRMINGHAM, AL 35203	**-***6130	501(C)(3)	48,333.	0.			GENERAL SUPPORT
ALABAMA AUDUBON 3720 4TH AVENUE, SOUTH BIRMINGHAM, AL 35222	**-***8925	501(C)(3)	19,250.	0.			GENERAL SUPPORT
NEW LIFE PANTRY P.O. BOX 5472 5626 ASH STREET BIRMINGHAM, AL 35207	**-***3036	501(C)(3)	29,000.	0.			THRIVING COMMUNITIES
SOUTHERN ENVIRONMENTAL LAW CENTER 2829 SECOND AVE S #282 BIRMINGHAM, AL 35233	**-***6778	501(C)(3)	12,250.	0.			GENERAL SUPPORT
WORLD WILDLIFE FUND 1250 24TH ST NW WASHINGTON, DC 20037	**-***3387	501(C)(3)	5,200.	0.			GENERAL SUPPORT
GREYSTONE OUTREACH LEGACY FOUNDATION - 4100 GREYSTONE DR. - VESTAVIA HILLS, AL 35242-6409	**-***5962	501(C)(3)	8,000.	0.			GENERAL SUPPORT
JONES VALLEY TEACHING FARM PO BOX 320230 BIRMINGHAM, AL 35232	**-***9003	501(C)(3)	108,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
AMERICAN RED CROSS 700 CALDWELL TRACE BIRMINGHAM, AL 35242	**-***6605	501(C)(3)	42,067.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS

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JEWISH FEDERATION OF GREATER WASHINGTON - 6101 EXECUTIVE BLVD STE 100 - N BETHESDA, MD 20852-3913	**-***2445	501(C)(3)	6,800.	0.			SPECIAL PROGRAMS
AMERICAN ENTERPRISE INSTITUTE 1789 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20036	**-***8495	501(C)(3)	25,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
NATURE CONSERVANCY 209 20TH ST. N. #70 BIRMINGHAM, AL 35203	**-***2652	501(C)(3)	380,581.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
UNIVERSITY OF VIRGINIA ALUMNI ASSOCIATION - P.O. BOX 400314 - CHARLOTTESVILLE, VA 22904	**-***5595	501(C)(3)	20,000.	0.			SCHOLARSHIPS
CHATHAM HALL 800 CHATHAM HALL CIRCLE CHATHAM, VA 24531-3085	**-***5878	501(C)(3)	222,500.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
RANDOLPH COLLEGE RANDOLPH COLLEGE OFFICE OF INSTITUTIONAL ADVANCEMENT P.O. BOX 3215 - LYNCHBU	**-***5941	501(C)(3)	13,039.	0.			GENERAL SUPPORT
WASHINGTON AND LEE UNIVERSITY ANNUAL FUND OFFICE 204 W. WASHINGTON ST. - LEXINGTON, VA 24450-0303	**-***5977	501(C)(3)	10,850.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
SWEET BRIAR COLLEGE PO BOX 1057 SWEET BRIAR, VA 24595	**-***4105	501(C)(3)	16,000.	0.			SPECIAL PROGRAMS
CHRISTIAN AFRICAN LEADERSHIP MINISTRIES - PO BOX 232 - TRUSSVILLE, AL 35173	**-***8407	501(C)(3)	40,000.	0.			GENERAL SUPPORT

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COLLEGE FOUNDATION OF THE UNIVERSITY OF VIRGINIA - ARTS AND SCIENCE DEPT P.O. BOX 400801 - CHARLOTTESVILLE, VA 22904	**-***9312	501(C)(3)	55,000.	0.			SPECIAL PROGRAMS
UNIVERSITY OF VIRGINIA P.O. BOX 37963 BOONE, IA 50037	**-***1796	501(C)(3)	28,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
UNIVERSITY OF VIRGINIA-DARDEN SCHOOL FOUNDATION - PO BOX 7263 - CHARLOTTESVLE, VA 22906-7263	**-***6419	501(C)(3)	10,000.	0.			GENERAL SUPPORT
WAKE FOREST UNIVERSITY C/O MARY M. EVANS PO BOX 7227 WINSTON-SALEM, NC 27109	**-***2138	501(C)(3)	10,000.	0.			SPECIAL PROGRAMS
CAROLINA UNIVERSITY 420 S BROAD STREET WINSTON-SALEM, NC 27101	**-***4591	501(C)(3)	5,679.	0.			GENERAL SUPPORT
ALABAMA ANIMAL ADOPTION SOCIETY 2808 CRESCENT AVENUE BIRMINGHAM, AL 35209	**-***6655	501(C)(3)	5,558.	0.			GENERAL SUPPORT
SPACE ONE ELEVEN 2409 2ND AVE NORTH BIRMINGHAM, AL 35203-3809	**-***0249	501(C)(3)	23,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
CHILDREN'S HARBOR 434 CHILDREN'S HARBOR DR. ECLECTIC, AL 36024	**-***2070	501(C)(3)	86,336.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
BIRMINGHAM BUSINESS ALLIANCE FOUNDATION - 505 20TH STREET NORTH, SUITE 200 - BIRMINGHAM, AL 35203	**-***2546	501(C)(3)	15,000.	0.			SPECIAL PROGRAMS

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GRACE HOUSE MINISTRIES 4923 FARRELL AVE FAIRFIELD, AL 35064	**-***3169	501(C)(3)	34,500.	0.			GENERAL SUPPORT
PEACHTREE PRESBYTERIAN CHURCH 3434 ROSWELL ROAD NW ATLANTA, GA 30305	**-***6210	501(C)(3)	30,000.	0.			GENERAL SUPPORT
SALVATION ARMY PO BOX 11005 BIRMINGHAM, AL 35202	**-***0607	501(C)(3)	84,041.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
JEWISH FEDERATION OF GREATER ATLANTA - 1440 SPRING ST. NW - ATLANTA, GA 30309	**-***1791	501(C)(3)	6,500.	0.			SPECIAL PROGRAMS
SAMARITAN'S PURSE P O BOX 3000 BOONE, NC 28607	**-***7002	501(C)(3)	117,242.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
NATIONAL CHRISTIAN FOUNDATION ALABAMA - 400 OFFICE PARK DR SUITE 201 - BIRMINGHAM, AL 35223	**-***3949	501(C)(3)	25,000.	0.			SPECIAL PROGRAMS
REFORMED UNIVERSITY FELLOWSHIP 1700 N BROWN RD STE 104 LAWRENCEVILLE, GA 30043-8143	**-***3181	501(C)(3)	8,100.	0.			SPECIAL PROGRAMS
AIDS ALABAMA 3529 7TH AVE S BIRMINGHAM, AL 35222-3210	**-***7755	501(C)(3)	94,500.	0.			EQUITY AND INCLUSION + GENERAL SUPPORT + PERSISTENT POVERTY
BIRMINGHAM CIVIL RIGHTS INSTITUTE 520 16TH STREET NORTH BIRMINGHAM, AL 35203	**-***2067	501(C)(3)	28,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS

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MCWANE SCIENCE CENTER 200 19TH STREET NORTH BIRMINGHAM, AL 35203	**-***3712	501(C)(3)	34,500.	0.			GENERAL SUPPORT
FRIENDS OF CATS AND DOGS FOUNDATION - P.O. BOX 130398 - BIRMINGHAM, AL 35213	**-***1231	501(C)(3)	17,741.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
RED MOUNTAIN THEATRE COMPANY P.O. BOX 278 BIRMINGHAM, AL 35201	**-***4417	501(C)(3)	289,600.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
TEMPLE EMANU-EL 2100 HIGHLAND AVENUE BIRMINGHAM, AL 35205	**-***5803	501(C)(3)	9,600.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
SOCIETY OF INTERNATIONAL FELLOWS/GLOBAL NETWORK FOUNDATION, INC. - 715 PEACHTREE STREET, SUITE 200 - ATLANTA, GA 30308	**-***9383	501(C)(3)	10,000.	0.			SPECIAL PROGRAMS
ALABAMA POSSIBLE 1016 19TH STREET S BIRMINGHAM, AL 35205	**-***4080	501(C)(3)	11,000.	0.			GENERAL SUPPORT + SCHOLARSHIPS
MOUNTAIN BROOK LIBRARY FOUNDATION 50 OAK STREET BIRMINGHAM, AL 35213	**-***4979	501(C)(3)	27,735.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
JEFFERSON CO SCH PUBLIC ED FOUNDATION - 2100 RICHARD ARRINGTON JR BLVD S - BIRMINGHAM, AL 35209-1891	**-***9274	501(C)(3)	32,200.	0.			SPECIAL PROGRAMS + THRIVING COMMUNITIES
PLANNED PARENTHOOD SOUTHEAST, INC. 241 PEACHTREE STREET NE, SUITE 400 ATLANTA, GA 30303	**-***5874	501(C)(3)	16,029.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS

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CHRIST MEMORIAL CHAPEL P.O. BOX 582 HOBE SOUND, FL 33475	**-***2964	501(C)(3)	10,000.	0.			GENERAL SUPPORT
UNIVERSITY OF FLORIDA FOUNDATION ATTN: GIFTS AND RECORDS PO BOX 1442 GAINESVILLE, FL 32604	**-***4739	501(C)(3)	10,000.	0.			SPECIAL PROGRAMS
SAINT STEPHENS EPISCOPAL SCHOOL 315 41ST ST W BRADENTON, FL 34209-2943	**-***1635	501(C)(3)	10,000.	0.			GENERAL SUPPORT
JUCAN FOUNDATION 5500 S. US HWY 287 CORNICNA, TX 75109	**-***2488	501(C)(3)	5,150.	0.			GENERAL SUPPORT
MISSIONARY GUADALUPANS OF THE HOLY SPIRIT - PO BOX 538 - EUTAW, AL 35462	**-***6522	501(C)(3)	6,000.	0.			GENERAL SUPPORT
HOBE SOUND COMMUNITY CHEST P.O. BOX 511 HOBE SOUND, FL 33475-0511	**-***5092	501(C)(3)	17,000.	0.			GENERAL SUPPORT
PIKEVILLE ROTARY CLUB PO BOX 988 PIKEVILLE, KY 41502	**-***9396	501(C)(3)	10,000.	0.			SPECIAL PROGRAMS
BAYLOR SCHOOL 171 BAYLOR SCHOOL ROAD CHATTANOOGA, TN 37405	**-***6365	501(C)(3)	30,000.	0.			GENERAL SUPPORT + SCHOLARSHIPS
UNIVERSITY OF THE SOUTH 735 UNIVERSITY AVENUE SEWANEE, TN 37383-1000	**-***5697	501(C)(3)	6,500.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS

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MCCALLIE SCHOOL, INC. 500 DODDS AVE CHATTANOOGA, TN 37404	**-***5837	501(C)(3)	113,833.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
VANDERBILT UNIVERSITY PMB 407727-2301 VANDERBILT PL NASHVILLE, TN 37203-9700	**-***6822	501(C)(3)	6,000.	0.			GENERAL SUPPORT
ST. JUDE CHILDREN'S RESEARCH HOSPITAL - 501 ST JUDE PLACE - MEMPHIS, TN 38105	**-***6012	501(C)(3)	11,328.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
BRIARCREST CHRISTIAN SCHOOL 76 SOUTH HOUSTON LEVEE RD. EADS, TN 38028	**-***4165	501(C)(3)	15,000.	0.			SPECIAL PROGRAMS
INROADS BUSEY LOCKBOX PO BOX 14470 ST. LOUIS, MO 63178	**-***7197	501(C)(3)	9,290.	0.			GENERAL SUPPORT
BIRMINGHAM ZOO, INC 2630 CAHABA ROAD BIRMINGHAM, AL 35223	**-***1591	501(C)(3)	118,150.	0.			GENERAL SUPPORT + SPECIAL PROGRAMS + THRIVING COMMUNITIES
PRESTON TAYLOR MINISTRIES P.O.BOX 90442 NASHVILLE, TN 37209	**-***7018	501(C)(3)	10,000.	0.			GENERAL SUPPORT
HIGHLANDS UNITED METHODIST CHURCH 1045 20TH STREET SOUTH BIRMINGHAM, AL 35205	**-***8340	CHURCH/SYN	15,000.	0.			SPECIAL PROGRAMS
GREATER BIRMINGHAM HUMANE SOCIETY 300 SNOW DRIVE BIRMINGHAM, AL 35209	**-***8810	501(C)(3)	69,563.	0.			GENERAL SUPPORT + SPECIAL PROGRAM

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BIRMINGHAM SOUTHERN COLLEGE 900 ARKADELPHIA RD. BOX 549003 BIRMINGHAM, AL 35254	**-***8811	501(C)(3)	402,511.	0.			GENERAL SUPPORT + SCHOLARSHIPS + SPECIAL PORGRAM
CHILDREN'S AID SOCIETY 5525 13TH AVENUE SOUTH BIRMINGHAM, AL 35222	**-***8823	501(C)(3)	41,500.	0.			GENERAL SUPPORT + PERSISTENT POVERTY
CATHEDRAL CHURCH OF THE ADVENT 2017 6TH AVE NORTH BIRMINGHAM, AL 35203	**-***8824	501(C)(3)	180,451.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
FIRST UNITED METHODIST CHURCH 518 19TH STREET NORTH BIRMINGHAM, AL 35203	**-***8831	CHURCH/SYN	22,728.	0.			GENERAL SUPPORT
FIRST PRESBYTERIAN CHURCH 2100 4TH AVE N BIRMINGHAM, AL 35203	**-***8833	CHURCH/SYN	25,000.	0.			GENERAL SUPPORT
HUNTINGDON COLLEGE 1500 EAST FAIRVIEW AVENUE MONTGOMERY, AL 36106	**-***8841	501(C)(3)	15,000.	0.			SPECIAL PROGRAMS
INDEPENDENT PRESBYTERIAN CHURCH 3100 HIGHLAND AVENUE BIRMINGHAM, AL 35205	**-***8843	CHURCH/SYN	173,532.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
UNITED WAY OF CENTRAL ALABAMA P.O. BOX 320189 BIRMINGHAM, AL 35232-0189	**-***8846	501(C)(3)	1,170,896.	0.			GENERAL SUPPORT + SPECIAL PROGRAM
LAKESHORE FOUNDATION 4000 RIDGEWAY DRIVE BIRMINGHAM, AL 35209	**-***8847	501(C)(3)	13,154.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS

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QUARTERBACKING CHILDREN'S HEALTH FOUNDATION - 2019 4TH AVE N STE 101 - BIRMINGHAM, AL 35203-3360	**-***8872	501(C)(3)	24,050.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
YWCA 309 NORTH 23RD STREET BIRMINGHAM, AL 35203	**-***8882	501(C)(3)	155,500.	0.			ECONOMIC OPPORTUNITY + GENERAL SUPPORT + SPECIAL PORGRAMS
YWCA 2401 20TH PLACE SOUTH BIRMINGHAM, AL 35223	**-***9894	501(C)(3)	182,500.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
BOYS & GIRLS CLUBS OF CENTRAL ALABAMA - P.O. BOX 10391 - BIRMINGHAM, AL 35202	**-***2102	501(C)(3)	29,250.	0.			GENERAL SUPPORT + SPECIAL PROGRAMS + THRIVING COMMUNITIES
BOY SCOUTS OF AMERICA-GREATER AL COUNCIL - PO BOX 43307 - BIRMINGHAM, AL 35243-0307	**-***2107	501(C)(3)	88,000.	0.			GENERAL SUPPORT + SCHOLARSHIPS + SPECIAL PORGRAM
ALTAMONT SCHOOL 4801 ALTAMONT ROAD BIRMINGHAM, AL 35222	**-***2110	501(C)(3)	126,006.	0.			GENERAL SUPPORT + SCHOLARHIPS + SPECIAL PROGRAMS
UNITED METHODIST CHILDREN'S HOME 4001 CARMICHAEL RD STE 235 MONTGOMERY, AL 36106-3653	**-***2145	501(C)(3)	15,000.	0.			GENERAL SUPPORT
ST. MARY'S ON THE HIGHLANDS EPISCOPAL CHURCH - 1910 12TH AVENUE SOUTH - BIRMINGHAM, AL 35205	**-***2166	CHURCH/SYN	32,050.	0.			GENERAL SUPPORT
WILMER HALL CHILDREN'S HOME 3811 OLD SHELL ROAD MOBILE, AL 36608-1396	**-***2184	501(C)(3)	5,500.	0.			GENERAL SUPPORT

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CHILDREN'S OF ALABAMA 1600 7TH AVE SOUTH BIRMINGHAM, AL 35233	**-***7306	501(C)(3)	584,192.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
PRESBYTERIAN HOME FOR CHILDREN PO DRAWER 577 TALLADEGA, AL 35161	**-***7953	501(C)(3)	13,125.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
UNITED ABILITY 100 OSLO CIRCLE BIRMINGHAM, AL 35211	**-***7960	501(C)(3)	112,500.	0.			ECONOMIC OPPORTUNITY + GENERAL SUPPORT + SPECIAL PORGRAMS
COMMUNITY FOUNDATION OF NORTHEAST ALABAMA - 1130 QUINTARD AVE STE. 100 - ANNISTON, AL 36201	**-***8398	501(C)(3)	35,000.	0.			SPECIAL PROGRAMS
SAMFORD UNIVERSITY UNIVERSITY ADVANCEMENT 800 LAKESHORE DRIVE - BIRMINGHAM, AL 35229	**-***2914	501(C)(3)	478,950.	0.			GENERAL SUPPORT + SCHOLARSHIPS + SPECIAL PORGRAM
INDIAN SPRINGS SCHOOL 190 WOODWARD DRIVE INDIAN SPRINGS, AL 35124	**-***9832	501(C)(3)	36,351.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
WORKSHOPS, INC. 4244 3RD AVENUE SOUTH BIRMINGHAM, AL 35222	**-***0201	501(C)(3)	25,000.	0.			ECONOMIC OPPORTUNITY + GENERAL SUPPORT
BROTHER BRYAN MISSION P.O. BOX 11254 BIRMINGHAM, AL 35202	**-***2672	501(C)(3)	105,750.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
JUNIOR LEAGUE OF BIRMINGHAM 2212 20TH AVENUE SOUTH BIRMINGHAM, AL 35223	**-***4707	501(C)(3)	28,765.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS

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GIRLS INC OF CENTRAL ALABAMA 5201 8TH AVE S BIRMINGHAM, AL 35212	**-***8643	501(C)(3)	15,500.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
CANTERBURY UNITED METHODIST CHURCH 350 OVERBROOK ROAD BIRMINGHAM, AL 35213	**-***9624	CHURCH/SYN	75,999.	0.			GENERAL SUPPORT + SCHOLARSHIPS + SPECIAL PORGRAM
JUNIOR ACHIEVEMENT OF ALABAMA PO BOX 19307 HOMEWOOD, AL 35219	**-***0866	501(C)(3)	8,225.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
JIMMIE HALE MISSION P.O. BOX 10472 BIRMINGHAM, AL 35202-0472	**-***8757	501(C)(3)	129,986.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
OUR LADY OF SORROWS CATHOLIC CHURCH - 1728 OXMOOR ROAD - BIRMINGHAM, AL 35209	**-***6279	CHURCH/SYN	48,250.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
VESTAVIA HILLS BAPTIST CHURCH 2600 VESTAVIA DRIVE BIRMINGHAM, AL 35216	**-***5613	CHURCH/SYN	6,000.	0.			SPECIAL PORGRAMS
ST. FRANCIS XAVIER CATHOLIC CHURCH PO BOX 130669 BIRMINGHAM, AL 35213	**-***6520	CHURCH/SYN	10,600.	0.			GENERAL SUPPORT
VESTAVIA HILLS UNITED METHODIST CHURCH - 2061 KENTUCKY AVENUE - BIRMINGHAM, AL 35216	**-***8123	CHURCH/SYN	30,000.	0.			SPECIAL PROGRAMS
EPISCOPAL FOUNDATION OF JEFF CO 4941 MONTEVALLO ROAD BIRMINGHAM, AL 35210	**-***6404	501(C)(3)	16,305.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS

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HIGHLANDS DAY SCHOOL FOUNDATION 4901 OLD LEEDS ROAD BIRMINGHAM, AL 35213	**-***8769	501(C)(3)	8,500.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
MILES COLLEGE P.O. BOX 3800 BIRMINGHAM, AL 35208	**-***0608	501(C)(3)	50,000.	0.			SCHOLARSHIPS
MOUNTAIN BROOK BAPTIST CHURCH 3631 MONTEVALLO ROAD BIRMINGHAM, AL 35213-4299	**-***8187	CHURCH/SYN	80,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
CHRIST EPISCOPAL CHURCH 4912 LLYOD NOLAND PARKWAY FAIRFIELD, AL 35064	**-***9673	CHURCH/SYN	20,000.	0.			PERSISTENT POVERTY
FIRST BAPTIST CHURCH OF PELL CITY 2309 SECOND AVE. N. PELL CITY, AL 35125	**-***4294	501(C)(3)	5,284.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
BIRMINGHAM BOTANICAL SOCIETY/FRIENDS OF BIRMINGHAM BOTANICAL GARDENS - 2612 LANE PARK ROAD - BIRMINGHAM, AL 35223	**-***5111	501(C)(3)	194,580.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
ALABAMA WILDLIFE FEDERATION 3050 LANARK ROAD MILLBROOK, AL 36054	**-***6911	501(C)(3)	17,000.	0.			GENERAL SUPPORT
WALLACE STATE COMMUNITY COLLEGE 801 MAIN STREET NW HANCEVILLE, AL 35077-2000	**-***8828	SCHOOL/COL	5,112.	0.			SCHOLARSHIPS
A. G. GASTON BOYS & GIRLS CLUB 4821 AVENUE W BIRMINGHAM, AL 35208	**-***4348	501(C)(3)	12,500.	0.			GENERAL SUPPORT

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UNIVERSITY OF ALABAMA HUNTSVILLE 301 SPARKMAN DRIVE HUNTSVILLE, AL 35899	**-***0830	SCHOOL/COL	6,000.	0.			GENERAL SUPPORT + SPECIAL PROGRAMS + SCHOLARSHIPS
EASTER SEALS BIRMINGHAM AREA 529 BEACON PARKWAY WEST SUITE 214 BIRMINGHAM, AL 35209	**-***0609	501(C)(3)	20,000.	0.			EQUITY AND INCLUSION
GREATER BIRMINGHAM MINISTRIES 2304 12TH AVENUE NORTH BIRMINGHAM, AL 35234-3111	**-***7439	501(C)(3)	9,250.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
CATHOLIC CHARITIES/DIOCESE OF BIRMINGHAM AL - P.O. BOX 12047 - BIRMINGHAM, AL 35202	**-***1368	501(C)(3)	49,450.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
CRISIS CENTER 3620 8TH AVE SOUTH SUITE 110 BIRMINGHAM, AL 35222	**-***3947	501(C)(3)	313,750.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
HOMWOOD CITY SCHOOL DISTRICT 450 DALE AVE BIRMINGHAM, AL 35209	**-***6314	501(C)(3)	27,000.	0.			GENERAL SUPPORT + SPECIAL PROGRAMS
CHRISTIAN SERVICE MISSION 3600 3RD AVENUE SOUTH BIRMINGHAM, AL 35222	**-***4603	501(C)(3)	32,500.	0.			GENERAL SUPPORT + THRIVING COMMUNITIES
BRIARWOOD PRESBYTERIAN CHURCH 2200 BRIARWOOD WAY BIRMINGHAM, AL 35243	**-***3634	501(C)(3)	16,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
SHELBY CO. HISTORICAL SOCIETY, INC. - 1854 OLD COURTHOUSE - COLUMBIANA, AL 35051	**-***3157	501(C)(3)	24,000.	0.			EQUITY AND INCLUSION

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RUFFNER MOUNTAIN NATURE PRESERVE 1214 81ST ST S BIRMINGHAM, AL 35206-4526	**-***3391	501(C)(3)	72,100.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
LEGAL SERVICES ALABAMA 207 MONTGOMERY STREET, STE 120 MONTGOMERY, AL 36104	**-***3038	501(C)(3)	25,000.	0.			SPECIAL PROGRAMS
ST. STEPHENS EPISCOPAL CHURCH 3775 CROSSHAVEN DRIVE BIRMINGHAM, AL 35223	**-***1641	CHURCH/SYN	50,000.	0.			GENERAL SUPPORT
RONALD MCDONALD HOUSE CHARITIES OF ALABAMA - 1700 4TH AVE SOUTH - BIRMINGHAM, AL 35233	**-***3358	501(C)(3)	53,400.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
SERVICE GUILD OF BIRMINGHAM 1700 29TH COURT SOUTH BIRMINGHAM, AL 35209	**-***5302	501(C)(3)	10,000.	0.			SPECIAL PROGRAMS
ARC OF WALKER COUNTY 745 RUSSELL DAIRY RD JASPER, AL 35503	**-***0044	501(C)(3)	12,000.	0.			ECONOMIC OPPORTUNITY
KING'S HOME P.O. BOX 162 CHELSEA, AL 35043	**-***0276	501(C)(3)	25,582.	0.			GENERAL SUPPORT
NICHOLS TEMPLE AME CHURCH 701 18TH ST. ENSLEY P.O. BOX 8117 BIRMINGHAM, AL 35218	**-***1550	501(C)(3)	10,000.	0.			PERSISTENT POVERTY
ALABAMA INSTITUTE FOR DEAF AND BLIND FOUNDATION - P.O. BOX 698 - TALLADEGA, AL 35161	**-***7728	501(C)(3)	5,225.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GRANTSWOOD BAPTIST CHURCH 4850 GRANTSWOOD PLACE BIRMINGHAM, AL 35210	**-***9495	CHURCH/SYN	6,239.	0.			GENERAL SUPPORT
WALKER CO. HUMANE SOCIETY P.O. BOX 1407 JASPER, AL 35502	**-***9530	501(C)(3)	10,000.	0.			GENERAL SUPPORT
ALABAMA WILDLIFE CENTER 100 TERRACE DRIVE OAK MOUNTAIN STAT PELHAM, AL 35124	**-***3173	501(C)(3)	7,558.	0.			GENERAL SUPPORT
JOSEPH S. BRUNO EDUCATIONAL FOUNDATION - 4930 WINDWOOD CIRCLE - BIRMINGHAM, AL 35242	**-***6873	501(C)(3)	25,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
SHELBY HUMANE SOCIETY 110 MCDOW DRIVE COLUMBIANA, AL 35051	**-***7987	501(C)(3)	44,217.	0.			GENERAL SUPPORT + SPECIAL PROGRAMS + THRIVING COMMUNITIES
LEADERSHIP BIRMINGHAM P O BOX 2641, BIN 12S BIRMINGHAM, AL 35291	**-***3118	501(C)(3)	11,925.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
COMMUNITY FOOD BANK OF CENTRAL ALABAMA - 107 WALTER DAVIS DRIVE - BIRMINGHAM, AL 35209	**-***7956	501(C)(3)	181,725.	0.			GENERAL SUPPORT + PERSISTENT POVERTY + SPECIAL PROGRAMS
ASHLAND FIRST UNITED METHODIST CHURCH - P.O. BOX 305 - ASHLAND, AL 36251	**-***3032	CHURCH/SYN	8,000.	0.			SPECIAL PROGRAMS
FIRST BAPTIST CHURCH OF VINCENT 15 WAITE ST. PO BOX 43 VINCENT, AL 35178	**-***5071	501(C)(3)	16,257.	0.			GENERAL SUPPORT

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ST. VINCENT'S FOUNDATION 1130 22ND ST. S. STE 1000 BIRMINGHAM, AL 35205	**-***8066	501(C)(3)	32,000.	0.			GENERAL SUPPORT + SCHOLARSHIPS + SPECIAL PORGRAM
ALABAMA JAZZ HALL OF FAME 1701 4TH AVENUE NORTH BIRMINGHAM, AL 35203	**-***0612	501(C)(3)	50,000.	0.			SPECIAL PORGRAMS
CHILDREN'S HOSPITAL FOUNDATION 1600 7TH AVE SOUTH BIRMINGHAM, AL 35233	**-***9471	501(C)(3)	10,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
CHILDCARE RESOURCES 244 WEST VALLEY AVE SUITE 200 BIRMINGHAM, AL 35209-3616	**-***2628	501(C)(3)	11,500.	0.			GENERAL SUPPORT
ACLU OF ALABAMA FOUNDATION PO BOX 6179 MONTGOMERY, AL 36106	**-***3872	501(C)(3)	32,000.	0.			GENERAL SUPPORT
COOPERATIVE DOWNTOWN MINISTRIES/OLD FIREHOUSE SHELTER - P.O. BOX 11722 - BIRMINGHAM, AL 35202	**-***4164	501(C)(3)	39,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
MAGIC MOMENTS 2112 11TH AVENUE SOUTH, SUITE 219 BIRMINGHAM, AL 35205	**-***7875	501(C)(3)	12,500.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
SMILE-A-MILE 1600 2ND AVE. S. BIRMINGHAM, AL 35233	**-***7544	501(C)(3)	36,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
BIRMINGHAM AERO CLUB AIR SAFETY FOUNDATION - 4343 73RD STREET NORTH - BIRMINGHAM, AL 35206	**-***5654	501(C)(3)	5,424.	0.			SCHOLARSHIPS

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ALABAMA REGIONAL MEDICAL SERVICES P.O. BOX 11526 BIRMINGHAM, AL 35202	**-***2057	501(C)(3)	25,000.	0.			PERSISTENT POVERTY
WEST ALABAMA FOOD BANK PO BOX 805 3160 MCFARLAND BLVD NORTHPORT, AL 35476	**-***7676	501(C)(3)	16,500.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
CORNERSTONE SCHOOLS OF ALABAMA PO BOX 320309 BIRMINGHAM, AL 35232	**-***8472	501(C)(3)	24,000.	0.			GENERAL SUPPORT
ASBURY UNITED METHODIST CHURCH - BIRMINGHAM - 6690 CAHABA VALLEY ROAD - BIRMINGHAM, AL 35242	**-***4649	501(C)(3)	50,000.	0.			GENERAL SUPPORT
BIRMINGHAM LANDMARKS THE LYRIC 1817 3RD AVENUE NORTH BIRMINGHAM, AL 35203	**-***8984	501(C)(3)	29,500.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
ROTARY CLUB OF BIRMINGHAM FOUNDATION - HERBERT CENTER/2019 4TH AVE N - BIRMINGHAM, AL 35203	**-***0032	501(C)(3)	21,500.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
HABITAT FOR HUMANITY GREATER BIRMINGHAM - P.O. BOX 540 - FAIRFIELD, AL 35064	**-***2910	501(C)(3)	19,000.	0.			GENERAL SUPPORT
TITUSVILLE DEVELOPMENT CORPORATION 300 KAPPA AVE SOUTH BIRMINGHAM, AL 35205	**-***4639	501(C)(3)	12,500.	0.			SPECIAL PROGRAMS
KIWANIS CLUB OF HOMEWOOD-MT BROOK FOUNDATION - P.O. BOX 59081 - BIRMINGHAM, AL 35259	**-***1439	501(C)(3)	30,000.	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	**-***2435	501(C)(3)	90,883.	0.			EQUITY AND INCLUSION + GENERAL SUPPORT + SPECIAL PORGRAMS
CAHABA RIVER SOCIETY 2717 7TH AVE S STE 205 BIRMINGHAM, AL 35233	**-***7276	501(C)(3)	25,013.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
COMMUNITY KITCHENS 1024 12TH ST S BIRMINGHAM, AL 35205-5234	**-***8804	501(C)(3)	6,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
FAIR HOUSING CENTER OF NORTHERN ALABAMA - 1820 7TH AVENUE NORTH, SUITE 110 - BIRMINGHAM, AL 35203	**-***1920	501(C)(3)	10,000.	0.			SPECIAL PROGRAMS
STUDIO BY THE TRACKS P.O. BOX 101144 IRONDALE, AL 35210-6144	**-***4336	501(C)(3)	18,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
SAFEHOUSE OF SHELBY COUNTY P.O. BOX 275 PELHAM, AL 35124	**-***7280	501(C)(3)	10,029.	0.			SPECIAL PROGRAMS
LEADERSHIP ALABAMA P.O. BOX 131394 BIRMINGHAM, AL 35213	**-***7967	501(C)(3)	19,500.	0.			GENERAL SUPPORT
AMISTAD MISSION P.O. BOX 23030 NASHVILLE, TN 37202	**-***1215	501(C)(3)	11,000.	0.			GENERAL SUPPORT
COLLAT JEWISH FAMILY SERVICES 3940 MONTCLAIR RD #205 BIRMINGHAM, AL 35213-2416	**-***5318	501(C)(3)	10,750.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS

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CAWACO RESOURCE CONSERVATION AND DEVELOPMENT COUNCIL - 2112 11TH AVE SOUTH SUITE 541 - BIRMINGHAM, AL 35205	**-***7283	501(C)(3)	392,225.	0.			SPECIAL PROGRAMS
LAKESIDE HOSPICE 4010 MASTERS RD PELL CITY, AL 35128	**-***5850	501(C)(3)	21,000.	0.			GENERAL SUPPORT + SPECIAL PROGRAMS
BIRMINGHAM JEWISH FEDERATION 3966 MONTCLAIR RD. BIRMINGHAM, AL 35213	**-***5456	501(C)(3)	38,350.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
CHRISTIAN LOVE PANTRY 205 EDWIN HOLLADAY PLACE #105 PELL CITY, AL 35125	**-***8552	501(C)(3)	7,000.	0.			GENERAL SUPPORT
A+ EDUCATION PARTNERSHIP P.O. BOX 4433 MONTGOMERY, AL 36103	**-***0676	501(C)(3)	26,000.	0.			GENERAL SUPPORT
LITERACY COUNCIL OF CENTRAL ALABAMA - 2301 1ST AVE N STE 102 - BIRMINGHAM, AL 35203	**-***1186	501(C)(3)	24,532.	0.			GENERAL SUPPORT + SCHOLARSHIPS + SPECIAL PROGRAM
MARANATHAN FAMILY LEARNING CENTER P.O. BOX 157 BIRMINGHAM, AL 35201	**-***1829	501(C)(3)	54,500.	0.			GENERAL SUPPORT + PERSISTENT POVERTY
ALZHEIMER'S OF CENTRAL ALABAMA P.O. BOX 2273 BIRMINGHAM, AL 35201	**-***8096	501(C)(3)	107,359.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
MOUNTAIN BROOK CITY SCHOOLS FOUNDATION - 32 VINE STREET - BIRMINGHAM, AL 35213	**-***2587	501(C)(3)	24,350.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS

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UNIVERSITY OF WEST ALABAMA FOUNDATION - STATION 6 - LIVINGSTON, AL 35470	**-***4127	501(C)(3)	10,000.	0.			GENERAL SUPPORT
EQUALITY VOLUNTEER FIRE DEPARTMENT PO BOX 13 EQUALITY, AL 36026	**-***6507	501(C)(3)	7,500.	0.			GENERAL SUPPORT + SPECIAL PROGRAMS
MOUNTAIN BROOK COMMUNITY CHURCH 3001 HIGHWAY 280 EAST BIRMINGHAM, AL 35243	**-***0839	CHURCH/SYN	28,500.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
MAGNOLIA CHURCH OF CHRIST 2650 VULCAN AVE FLORENCE, AL 35630	**-***4793	501(C)(3)	32,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
EXCEPTIONAL FOUNDATION 1616 OXMOOR ROAD BIRMINGHAM, AL 35209	**-***6855	501(C)(3)	19,000.	0.			GENERAL SUPPORT
ALABAMA SYMPHONIC ASSOCIATION 3621 6TH AVENUE SOUTH BIRMINGHAM, AL 35222	**-***3036	501(C)(3)	77,611.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
BETTER BASICS 1231 2ND AVENUE SOUTH BIRMINGHAM, AL 35233	**-***6040	501(C)(3)	10,000.	0.			GENERAL SUPPORT
OASIS WOMEN'S COUNSELING CENTER 1900 14TH AVENUE SOUTH BIRMINGHAM, AL 35205	**-***8764	501(C)(3)	35,753.	0.			GENERAL SUPPORT + SPECIAL PROGRAMS + THRIVING COMMUNITIES
CREATIVE WELLNESS INSTITUTE 1116 23RD STREET SOUTH BIRMINGHAM, AL 35205	**-***9971	501(C)(3)	6,000.	0.			SPECIAL PROGRAMS

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HOMEWOOD CITY SCHOOLS FOUNDATION PO BOX 59764 BIRMINGHAM, AL 35259	**-***2466	501(C)(3)	20,000.	0.			GENERAL SUPPORT
EQUAL JUSTICE INITIATIVE 122 COMMERCE ST MONTGOMERY, AL 36104	**-***5091	501(C)(3)	11,858.	0.			GENERAL SUPPORT
ANIMAL SAVERS OF PELL CITY PO BOX 566 PELL CITY, AL 35125	**-***9326	501(C)(3)	14,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
RESTORATION ACADEMY 4600 CARNEGIE AVE FAIRFIELD, AL 35064	**-***8984	501(C)(3)	85,300.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
ALABAMA ASSOC OF NONPROFITS P.O. BOX 293932 BIRMINGHAM, AL 35229	**-***2730	501(C)(3)	25,000.	0.			THRIVING COMMUNITIES
COMMUNITY GRIEF SUPPORT SERVICE 1119 OXMOOR ROAD BIRMINGHAM, AL 35209	**-***8251	501(C)(3)	15,500.	0.			GENERAL SUPPORT + THRIVING COMMUNITIES
VESTAVIA HILLS LIBRARY FOUNDATION 1221 MONTGOMERY HIGHWAY BIRMINGHAM, AL 35216	**-***6876	501(C)(3)	15,000.	0.			GENERAL SUPPORT
HAND-IN-PAW, INC. 617 38TH STREET SOUTH BIRMINGHAM, AL 35222	**-***0375	501(C)(3)	10,180.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
SPARTAN ATHLETIC FOUNDATION PO BOX 2074 BIRMINGHAM, AL 35201	**-***6540	501(C)(3)	6,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS

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FIRST LIGHT 2230 4TH AVENUE NORTH BIRMINGHAM, AL 35203	**-***7189	501(C)(3)	15,500.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
BLOUNT CO. EDUCATION FOUNDATION, INC - P.O. BOX 603 - ONEONTA, AL 35121	**-***5348	501(C)(3)	25,000.	0.			THRIVING COMMUNITIES
HISPANIC INTEREST COALITION OF AL P.O. BOX 190299 HOMEWOOD, AL 35219	**-***5764	501(C)(3)	49,000.	0.			GENERAL SUPPORT + SCHOLARSHIPS + SPECIAL PORGRAM
SIDEWALK FILM CENTER AND CINEMA 1821 2ND AVENUE NORTH BIRMINGHAM, AL 35203	**-***7239	501(C)(3)	32,800.	0.			GENERAL SUPPORT + SCHOLARSHIPS + SPECIAL PORGRAM
BELL CENTER FOR EARLY INTERVENTION PROGRAMS - 1700 29TH COURT SOUTH - BIRMINGHAM, AL 35209	**-***4330	501(C)(3)	96,400.	0.			GENERAL SUPPORT + SPECIAL PROGRAMS + THRIVING COMMUNITIES
SPRING VALLEY SCHOOL (FOUNDATION) 2701 SYDNEY DRIVE BIRMINGHAM, AL 35211	**-***3000	501(C)(3)	12,500.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
TRINITY COUNSELING, INC. 1025 MONTGOMERY HWY #214 BIRMINGHAM, AL 35216	**-***3854	501(C)(3)	37,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
CAHABA VALLEY HEALTH CARE, INC 1515 6TH AVE SOUTH BIRMINGHAM, AL 35233	**-***4350	501(C)(3)	15,000.	0.			SPECIAL PROGRAMS
TUMTUM TREE FOUNDATION P.O. BOX 43651 BIRMINGHAM, AL 35243	**-***6035	501(C)(3)	37,500.	0.			GENERAL SUPPORT

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CENTER FOR EXECUTIVE LEADERSHIP 200 UNION HILL DRIVE STE 200 BIRMINGHAM, AL 35209	**-***3584	501(C)(3)	111,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
YOUTHSERVE P.O. BOX 530334 BIRMINGHAM, AL 35253	**-***8901	501(C)(3)	18,000.	0.			GENERAL SUPPORT
RAILROAD PARK FOUNDATION P.O. BOX 13691 APT 105 BIRMINGHAM, AL 35202	**-***0818	501(C)(3)	68,300.	0.			ECONOMIC OPPORTUNITY + GENERAL SUPPORT + SPECIAL PORGRAMS
THE HEALING PLACE 2409 WILDWOOD MUSCLE SHOALS, AL 35661-6407	**-***5227	501(C)(3)	25,000.	0.			GENERAL SUPPORT
OAK MOUNTAIN MISSIONS MINISTRIES 2699 PELHAM PARKWAY PELHAM, AL 35124	**-***8041	501(C)(3)	5,540.	0.			GENERAL SUPPORT
AUBURN UNIVERSITY 317 SOUTH COLLEGE STREET AUBURN UNIVERSITY, AL 36849	**-***0724	501(C)(3)	20,000.	0.			SCHOLARSHIPS + SPECIAL PROGRAMS
TARRANT CITY BOARD OF EDUCATION 1318 ALABAMA STREET TARRANT, AL 35217	**-***1122	SCHOOL/COL	35,000.	0.			SPECIAL PROGRAMS
UNIVERSITY OF ALABAMA 355 ROSE ADMINISTRATION BOX 870123 TUSCALOOSA, AL 35487	**-***1138	501(C)(3)	160,094.	0.			GENERAL SUPPORT + SCHOLARSHIPS + SPECIAL PORGRAM
BIRMINGHAM PUBLIC LIBRARY 2100 PARK PLACE BIRMINGHAM, AL 35203	**-***1201	GOVERNMENT	29,000.	0.			THRIVING COMMUNITIES

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TOWN OF MORRIS 8304 STOUTS ROAD MORRIS, AL 35116	**-***1997	501(C)(3)	18,485.	0.			SPECIAL PROGRAMS
MOUNTAIN BROOK HIGH SCHOOL 3650 BETHUNE DRIVE BIRMINGHAM, AL 35223	**-***5319	SCHOOL/COL	17,210.	0.			SCHOLARSHIPS + SPECIAL PROGRAMS
UAB 1720 2ND AVENUE SOUTH AB 1230 UAB ADVANCEMENT - GIFT RECORDS - BIRMINGHAM, A	**-***5396	GOVERNMENT	3,444,558.	0.			GENERAL SUPPORT + SPECIAL PROGRAMS + SCHOLARSHIPS THRIVING COMMUNITIES
AUBURN UNIVERSITY FOUNDATION 317 S COLLEGE ST AUBURN, AL 36849	**-***2422	501(C)(3)	163,000.	0.			SCHOLARSHIPS + SPECIAL PROGRAMS
LINLY HEFLIN UNIT INDIVIDUAL GIFTS 13 OFFICE PARK CIRCLE SUITE 8 - BIRMINGHAM, AL 35223	**-***7968	501(C)(3)	12,043.	0.			GENERAL SUPPORT + SCHOLARSHIPS
BIRMINGHAM HISTORICAL SOCIETY PO BOX 321474 BIRMINGHAM, AL 35232	**-***0611	501(C)(3)	6,000.	0.			GENERAL SUPPORT
BIRMINGHAM CHILDREN'S THEATRE P.O. BOX 1362 BIRMINGHAM, AL 35201-1362	**-***0838	501(C)(3)	27,500.	0.			EQUITY AND INCLUSION + GENERAL SUPPORT + SPECIAL PORGRAMS
ALABAMA EDUCATIONAL TELEVISION FOUNDATION AUTHORITY/ALABAMA PUBLIC TELEVISION - 2112 11TH AVE S STE 400 - BIRMINGHAM, AL	**-***0895	501(C)(3)	8,528.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
KATE DUNCAN SMITH DAR SCHOOL 6077 MAIN STREET GRANT, AL 35747	**-***2700	501(C)(3)	5,050.	0.			SPECIAL PROGRAMS

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COMMUNITY ACTION AGENCY OF NORTHEAST AL INC. - P.O. BOX 1487 - RAINSVILLE, AL 35986	**-***3512	501(C)(3)	40,000.	0.			PERSISTENT POVERTY
BIRMINGHAM KIWANIS FOUNDATION 2019 4TH AVENUE NORTH BIRMINGHAM, AL 35203	**-***6848	501(C)(3)	12,500.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
BAPTIST HEALTH FOUNDATION 1130 22ND STREET SOUTH/SUITE 3200 BIRMINGHAM, AL 35205	**-***2097	501(C)(3)	36,769.	0.			SPECIAL PROGRAMS
MISSISSIPPI STATE UNIVERSITY FOUNDATION, INC. - PO BOX 6149 - MISSISSIPPI STATE, MS 39762	**-***0581	501(C)(3)	25,000.	0.			SPECIAL PROGRAMS
MAASAI WILDERNESS CONSERVATION TRUST - PO BOX 1413 - SANTA BARBARA, CA 93102	**-***7488	501(C)(3)	20,000.	0.			SPECIAL PROGRAMS
LOVELADY CENTER/FREEDOM RAIN 7916 2ND AVE S BIRMINGHAM, AL 35206	**-***4856	501(C)(3)	65,700.	0.			GENERAL SUPPORT + PERSISTENT POVERTY + SPECIAL PROGRAMS
PELL CITY ROTARY CLUB FOUNDATION PO BOX 953 PELL CITY, AL 35125	**-***6399	501(C)(3)	6,000.	0.			GENERAL SUPPORT + SPECIAL PROGRAMS
EYESIGHT FOUNDATION OF ALABAMA 700 18TH ST SOUTH STE 123 BIRMINGHAM, AL 35233	**-***8980	501(C)(3)	16,515.	0.			GENERAL SUPPORT
FRESHWATER LAND TRUST P.O. BOX 337 BIRMINGHAM, AL 35201	**-***7424	501(C)(3)	323,134.	0.			GENERAL SUPPORT + SPECIAL PROGRAMS + THRIVING COMMUNITIES

Schedule I (Form 990)

THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM

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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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BLACK WARRIOR RIVERKEEPER 712 37TH STREET SOUTH BIRMINGHAM, AL 35222	**-***7394	501(C)(3)	49,151.	0.			GENERAL SUPPORT + SPECIAL PROGRAMS + THRIVING COMMUNITIES
HOUSTON METHODIST HOSPITAL FOUNDATION - PO BOX 4384 - HOUSTON, TX 77210	**-***0155	501(C)(3)	10,000.	0.			GENERAL SUPPORT
RONALD MCDONALD HOUSE CHARITIES OF CENTRAL TEXAS - 1315 BARBARA JORDAN BLVD - AUSTIN, TX 78723	**-***7664	501(C)(3)	25,000.	0.			SPECIAL PROGRAMS
MET CHURCH 11301 NORTH RIVERSIDE DR. KELLER, TX 76244	**-***3287	501(C)(3)	16,257.	0.			GENERAL SUPPORT
REBUILDING TOGETHER HOUSTON PO BOX 15315 HOUSTON, TX 77220	**-***7902	501(C)(3)	12,500.	0.			GENERAL SUPPORT
GRACE KLEIN COMMUNITY INC. 2652 OLD ROCKY RIDGE ROAD BIRMINGHAM, AL 35216	**-***9639	501(C)(3)	25,000.	0.			THRIVING COMMUNITIES
ALABAMA HOLOCAUST EDUCATION CENTER P.O. BOX 130805 BIRMINGHAM, AL 35213	**-***5027	501(C)(3)	57,610.	0.			EQUITY AND INCLUSION + GENERAL SUPPORT + SPECIAL PORGRAMS
BIG SKY COMMUNITY ORGANIZATION PO BOX 161404 BIG SKY, MT 59716-1404	**-***0589	501(C)(3)	20,000.	0.			SPECIAL PROGRAMS
MISSION INCREASE FOUNDATION - BIRMINGHAM - 400 OFFICE PARK DRIVE # 304 - BIRMINGHAM, AL 35223	**-***8279	501(C)(3)	10,000.	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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HIGHLANDS COLLEGE 3660 GRANDVIEW PKWY STE 100 VESTAVIA, AL 35243	**-***3355	501(C)(3)	200,000.	0.			SPECIAL PROGRAMS
COMMUNITY CARE DEVELOPMENT NETWORK P.O. BOX 610924 BIRMINGHAM, AL 35261	**-***5665	501(C)(3)	115,000.	0.			PERSISTENT POVERTY + SPECIAL PROGRAMS
OFFENDER ALUMNI ASSOCIATION 1000 24TH ST S BIRMINGHAM, AL 35205	**-***1582	501(C)(3)	1,150,565.	0.			SPECIAL PROGRAMS
DETERMINED TO BE MENTOR AND LEADERSHIP (D2B) - 1022 SADDLE RIDGE - PRATTVILLE, AL 36066	**-***7570	501(C)(3)	24,000.	0.			GENERAL SUPPORT + THRIVING COMMUNITIES
ENDEAVOR ATLANTA, INC. 255 E PACES FERRY RD NE STE 700 ATLANTA, GA 30305	**-***6875	501(C)(3)	25,000.	0.			GENERAL SUPPORT
RAISING ARROWS 300 HWY 78 EAST STE. 300 JASPER, AL 35501-3887	**-***4981	501(C)(3)	30,000.	0.			THRIVING COMMUNITIES
ISAAH 117 HOUSE P.O.BOX 842 ELIZABETHTON, TN 37644	**-***1497	501(C)(3)	20,000.	0.			SPECIAL PROGRAMS
THE HOPE INSTITUTE PO BOX 530491 BIRMINGHAM, AL 35253	**-***7951	501(C)(3)	10,000.	0.			GENERAL SUPPORT
LITTLE HANDS SERVING HEARTS 4227 OLD BROOK LANE BIRMINGHAM, AL 35243	**-***9425	501(C)(3)	26,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS

Schedule I (Form 990)

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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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PENNY FOUNDATION P.O. BOX 13181 BIRMINGHAM, AL 35203	**-***6091	501(C)(3)	15,000.	0.			THRIVING COMMUNITIES
CHOCOLATE MILK MOMMIES 1206 INVERNESS LANDING SHOAL CREEK, AL 35242	**-***8610	501(C)(3)	8,000.	0.			EQUITY AND INCLUSION
LEADERS OF EXCELLENCE INC. 25 WEST OXMOOR RD SUITE 23A BIRMINGHAM, AL 35209	**-***4099	501(C)(3)	10,000.	0.			GENERAL SUPPORT + THRIVING COMMUNITIES
I3 ACADEMY 1 55TH PL. S. BIRMINGHAM, AL 35212	**-***9224	501(C)(3)	25,000.	0.			GENERAL SUPPORT
REPRESENT JUSTICE 777 S ALAMEDA ST 2ND FLOOR LOS ANGELES, CA 90021	**-***1685	501(C)(3)	10,000.	0.			GENERAL SUPPORT
BROTHER LET'S TALK 400 CENTURY PARK SOUTH SUITE 106 VESTAVIA, AL 35226	**-***3650	501(C)(3)	20,000.	0.			THRIVING COMMUNITIES
PAINT ROCK FOREST RESEARCH CENTER 3402 ALTAMONT RD S BIRMINGHAM, AL 35205	**-***0973	501(C)(3)	28,000.	0.			GENERAL SUPPORT
BUSH HILLS CONNECTIONS 1203 BUSH CIR BIRMINGHAM, AL 35208	**-***3515	501(C)(3)	70,000.	0.			THRIVING COMMUNITIES
YOUTH REHABILITATION AND DEVELOPMENT PROGRAM OF ALABAMA - PO BOX 661162 - BIRMINGHAM, AL 35266	**-***4525	501(C)(3)	15,000.	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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUNG LIFE PO BOX 12041 HUNTSVILLE, AL 35815-2041	**-***5934	501(C)(3)	10,000.	0.			GENERAL SUPPORT
ASPEN INSTITUTE 2300 N. STREET, NW-SUITE 700 WASHINGTON, DC 20037	**-***9006	501(C)(3)	45,000.	0.			SPECIAL PROGRAMS
DENVER HOSPICE 8289 E LOWRY BLVD. DENVER, CO 80230	**-***3121	501(C)(3)	40,000.	0.			GENERAL SUPPORT
BOULDER JCC 6007 OREG AVENUE BOULDER, CO 80303	**-***2996	501(C)(3)	6,500.	0.			GENERAL SUPPORT
CREATE BIRMINGHAM 310 18TH ST N. SUITE 303 BIRMINGHAM, AL 35203	**-***1034	501(C)(3)	118,500.	0.			ECONOMIC OPPORTUNITY + GENERAL SUPPORT + SPECIAL PORGRAMS
COMMUNITY SERVICES FOR VISION REHABILITATION - 600 BEL AIR BLVD. SUITE 110 - MOBILE, AL 36606	**-***9407	501(C)(3)	40,000.	0.			SPECIAL PROGRAMS
GLOBAL MEDIA OUTREACH PO BOX 208867 DALLAS, TX 75320-8867	**-***0344	501(C)(3)	25,000.	0.			GENERAL SUPPORT
VAX 2 STOP CANCER P.O. BOX 530044 BIRMINGHAM, AL 35253	**-***8795	501(C)(3)	21,000.	0.			GENERAL SUPPORT + THRIVING COMMUNITIES
IGNITE ALABAMA 928 46TH ST. ENSLEY BIRMINGHAM, AL 35208	**-***2949	501(C)(3)	60,000.	0.			ECONOMIC OPPORTUNITY

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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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALABAMA ALLIANCE NETWORK 2130 HIGHLAND AVENUE SOUTH BIRMINGHAM, AL 35205	**-***0999	501(C)(3)	35,000.	0.			GENERAL SUPPORT
FORGE BREAST CANCER SURVIVOR CENTER - 1321 19TH ST. S. - BIRMINGHAM, AL 35205	**-***1327	501(C)(3)	475,000.	0.			GENERAL SUPPORT
ENCORE THEATRE & GALLERY 213 GADSDEN HIGHWAY SUITE 108 BIRMINGHAM, AL 35235	**-***6734	501(C)(3)	6,000.	0.			SPECIAL PROGRAMS
EV LOVES NYC 400 LINDEN ST. APT B BROOKLYN, NY 11237	**-***9014	501(C)(3)	9,000.	0.			GENERAL SUPPORT
EMPOWER CHARTER SCHOOL PO BOX 975 BESSEMER, AL 35020	**-***8676	501(C)(3)	52,000.	0.			GENERAL SUPPORT
CENTRAL ALABAMA REDEVELOPMENT ALLIANCE - 2910 ALLISON BONNET MEMORIAL DR SUITE 106, #317 - HUEYTOWN, AL 35023	**-***2833	501(C)(3)	8,000.	0.			ECONOMIC OPPORTUNITY
MAGIC CITY ACCEPTANCE ACADEMY 75 BAGBY DRIVE BIRMINGHAM, AL 35206	**-***4546	501(C)(3)	12,500.	0.			SPECIAL PROGRAMS
FARMINGTON HIGH SCHOOL 2200 NORTH SUNSET AVE FARMINGTON, NM 87401	**-***0130	501(C)(3)	10,000.	0.			SPECIAL PROGRAMS
URBAN COMMUNITY MONTESSORI C/O COURTNEY DAVIS 3512 BROOKFIELD HOOVER, AL 35226	**-***0701	501(C)(3)	25,000.	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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEAM ROWLAND 720 RESTORATION DR HOOVER, AL 35226-2040	**-***8708	501(C)(3)	15,000.	0.			GENERAL SUPPORT + SPECIAL PORGRAMS
PORTRAITS OF HOPE, INC. PO BOX 131384 BIRMINGHAM, AL 35213	**-***4750	501(C)(3)	10,000.	0.			GENERAL SUPPORT
KIDS PLAY ALABAMA PO BOX 660076 VESTAVIA, AL 35266-0076	**-***9490	501(C)(3)	6,300.	0.			GENERAL SUPPORT + THRIVING COMMUNITIES
DEPORTED ASYLUM SEEKERS ASSISTANCE PROJECT - 10 OAK MEADOW DR. - LEEDS, AL 35094	**-***4452	501(C)(3)	100,000.	0.			GENERAL SUPPORT
LIIV ATLANTA PO BOX 76213 ATLANTA, GA 30358	**-***0871	501(C)(3)	10,000.	0.			GENERAL SUPPORT
MOONSHOT PLATFORM 201 N. UNION ST. STE. 110 ALEXANDRIA, VA 22314	**-***8278	501(C)(3)	50,000.	0.			GENERAL SUPPORT
TUSKEGEE CEMETERY ASSOCIATION 217 MERRY CT. PIKE ROAD, AL 36064-2237	**-***3562	501(C)(3)	50,000.	0.			SPECIAL PROGRAMS
BREAKTHROUGH COLLABORATIVE 1914 4TH AVE NORTH STE 330 BIRMINGHAM, AL 35203	**-***0620	501(C)(3)	51,000.	0.			GENERAL SUPPORT + SCHOLARSHIPS + THRIVING COMMUNITIES
TIDES CENTER P.O. BOX 29907 SAN FRANCISCO, CA 94129-0907	**-***3100	501(C)(3)	10,000.	0.			SPECIAL PROGRAMS

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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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INTERNATIONAL DOCUMENTARY ASSOCIATION - C/O FISCAL SPONSORSHIP 3600 WILSHIRE BLVD., STE. 1810, - LOS ANGELES, CA	**-***1227	501(C)(3)	33,000.	0.			SPECIAL PROGRAMS
ISLAMIC RELIEF USA PO BOX 22250 ALEXANDRIA, VA 22304	**-***3134	501(C)(3)	10,000.	0.			GENERAL SUPPORT
SLOSS FURNACES FOUNDATION, INC. 20 32ND STREET NORTH BIRMINGHAM, AL 35222	**-***5476	501(C)(3)	20,500.	0.			SPECIAL PROGRAMS

THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM

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	28	80,042.	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.

**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

2022

Open to Public
Inspection

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

Employer identification number
****-***9631**

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 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
1a		
1b		
2		
3		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2022

THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) CHRISTOPHER NANNI PRESIDENT/CEO	(i)	191,031.	0.	0.	10,026.	24,573.	225,630.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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)**

Noncash Contributions

OMB No. 1545-0047

2022

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

Name of the organization **THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM** Employer identification number ****-***9631**

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	105	19,855,605.	FMV OR ESTIMATE
10 Securities - Closely held stock	X	4	1,239,475.	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 3 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) 2022

**SCHEDULE O
(Form 990)**

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 Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM

Employer identification number

-*9631

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) 2022

Name of the organization THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM	Employer identification number **-***9631
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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 XI, LINE 9, CHANGES IN NET ASSETS:

GAIN/(LOSS) ON INTEREST IN PERPETUAL TRUST	-2,237,640.
ACTUARIAL GAIN (LOSS) ON ANNUITY OBLIGATIONS	-169,656.
AGENCY ENDOWMENT CURRENT YEAR ACTIVITY RECORDED FOR TAX NOT ON BOOKS	2,535,169.
TOTAL TO FORM 990, PART XI, LINE 9	127,873.

FORM 990, PART XII, LINE 2C:
 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

2022

**Open to Public
Inspection**

Name of the organization **THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM** Employer identification number ****-***9631**

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

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

THE COMMUNITY FOUNDATION OF GREATER
BIRMINGHAM

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.

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

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

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) CHARITABLE REAL ESTATE FOUNDATION	C	14,221.	CASH
(2)			
(3)			
(4)			
(5)			
(6)			

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

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

2022

Department of the Treasury Internal Revenue Service

For calendar year 2022 or other tax year beginning , and ending

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

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

A Check box if address changed.

Name of organization (Check box if name changed and see instructions.) THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM

D Employer identification number ** - *** 9631

B Exempt under section 501(a) () 408(e) 220(e) 408A 530(a) 529(a) 529A

Print or Type

Number, street, and room or suite no. If a P.O. box, see instructions. 2100 1ST AVENUE NORTH, 700

E Group exemption number (see instructions) 8143

City or town, state or province, country, and ZIP or foreign postal code BIRMINGHAM, AL 35203

F Check box if an amended return.

C Book value of all assets at end of year 266,608,512.

G Check organization type 501(c) corporation 501(c) trust 401(a) trust Other trust State college/university

H Check if filing only to Claim credit from Form 8941 Claim a refund shown on Form 2439

I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation

J Enter the number of attached Schedules A (Form 990-T) 1

K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No

L The books are in care of CHRIS LUKETIC Telephone number 205-327-3815

Part I Total Unrelated Business Taxable Income

Table with 11 rows for Part I: Total Unrelated Business Taxable Income. Columns include line number, description, and amount. Total amount is 12,362.

Part II Tax Computation

Table with 7 rows for Part II: Tax Computation. Columns include line number, description, and amount. Total amount is 2,596.

LHA For Paperwork Reduction Act Notice, see instructions.

Part III Tax and Payments			
1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a		
b Other credits (see instructions)	1b		
c General business credit. Attach Form 3800 (see instructions)	1c		
d Credit for prior year minimum tax (attach Form 8801 or 8827)	1d		
e Total credits. Add lines 1a through 1d	1e		
2 Subtract line 1e from Part II, line 7	2		2,596.
3 Other amounts due. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach statement)	3		
4 Total tax. Add lines 2 and 3 (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here	4		2,596.
5 Current net 965 tax liability paid from Form 965-A, Part II, column (k)	5		0.
6a Payments: A 2021 overpayment credited to 2022	6a	12,784.	
b 2022 estimated tax payments. Check if section 643(g) election applies <input type="checkbox"/>	6b		
c Tax deposited with Form 8868	6c		
d Foreign organizations: Tax paid or withheld at source (see instructions)	6d		
e Backup withholding (see instructions)	6e		
f Credit for small employer health insurance premiums (attach Form 8941)	6f		
g Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other _____ Total	6g		
7 Total payments. Add lines 6a through 6g	7		12,784.
8 Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	8		
9 Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed	9		
10 Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid	10		10,188.
11 Enter the amount of line 10 you want: Credited to 2023 estimated tax 10,188. Refunded	11		0.

Part IV Statements Regarding Certain Activities and Other Information (see instructions)		Yes	No
1 At any time during the 2022 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here _____			X
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?			X
If "Yes," see instructions for other forms the organization may have to file.			
3 Enter the amount of tax-exempt interest received or accrued during the tax year \$ _____			
4 Enter available pre-2018 NOL carryovers here \$ _____ Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.			
5 Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.			
Business Activity Code	Available post-2017 NOL carryover		
	\$		
	\$		
6a Did the organization change its method of accounting? (see instructions)			X
b If 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," explain in Part V			

Part V Supplemental Information

Provide the explanation required by Part IV, line 6b. Also, provide any other additional information. See instructions.

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.				
	Signature of officer	Date	PRESIDENT & CEO	Title	
Paid Preparer Use Only	May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	MEGAN RANDOLPH		10/11/23		P00989558
	Firm's name	Firm's EIN		Firm's address	
WARREN AVERETT, LLC	**-***4437		2500 ACTON ROAD		
Firm's address	Phone no.		205-979-4100		
BIRMINGHAM, AL 35243					

**SCHEDULE A
(Form 990-T)**

Department of the Treasury
Internal Revenue Service

**Unrelated Business Taxable Income
From an Unrelated Trade or Business**

Go to www.irs.gov/Form990T for instructions and the latest information.
Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

1
OMB No. 1545-0047

2022

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

A Name of the organization THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM	B Employer identification number ** - *** 9631
C Unrelated business activity code (see instructions) 211100	D Sequence: 1 of 1

E Describe the unrelated trade or business **OIL AND GAS EXTRACTION**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a Gross receipts or sales				
b Less returns and allowances	c Balance			
2 Cost of goods sold (Part III, line 8)	1c			
3 Gross profit. Subtract line 2 from line 1c	2			
	3			
4 a Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions	4a			
b Net gain (loss) (Form 4797) (attach Form 4797). See instructions	4b			
c Capital loss deduction for trusts	4c			
5 Income (loss) from a partnership or an S corporation (attach statement)	5			
6 Rent income (Part IV)	6			
7 Unrelated debt-financed income (Part V)	7			
8 Interest, annuities, royalties, and rents from a controlled organization (Part VI)	8			
9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)	9			
10 Exploited exempt activity income (Part VIII)	10			
11 Advertising income (Part IX)	11			
12 Other income (see instructions; attach statement) STMT 1	12	19,981.		19,981.
13 Total. Combine lines 3 through 12	13	19,981.		19,981.

Part II **Deductions Not Taken Elsewhere** See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income

1 Compensation of officers, directors, and trustees (Part X)					
2 Salaries and wages					
3 Repairs and maintenance					
4 Bad debts					
5 Interest (attach statement). See instructions					
6 Taxes and licenses					748.
7 Depreciation (attach Form 4562). See instructions	7				
8 Less depreciation claimed in Part III and elsewhere on return	8a				
9 Depletion					2,997.
10 Contributions to deferred compensation plans					
11 Employee benefit programs					
12 Excess exempt expenses (Part VIII)					
13 Excess readership costs (Part IX)					
14 Other deductions (attach statement) SEE STATEMENT 2					2,874.
15 Total deductions. Add lines 1 through 14					6,619.
16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)					13,362.
17 Deduction for net operating loss. See instructions					0.
18 Unrelated business taxable income. Subtract line 17 from line 16					13,362.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2022

Part III Cost of Goods Sold Enter method of inventory valuation

1 Inventory at beginning of year	1	
2 Purchases	2	
3 Cost of labor	3	
4 Additional section 263A costs (attach statement)	4	
5 Other costs (attach statement)	5	
6 Total. Add lines 1 through 5	6	
7 Inventory at end of year	7	
8 Cost of goods sold. Subtract line 7 from line 6. Enter here and in Part I, line 2	8	
9 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)

1 Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.

A _____

B _____

C _____

D _____

	A	B	C	D
2 Rent received or accrued				
a From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)				
b From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)				
c Total rents received or accrued by property. Add lines 2a and 2b, columns A through D				
3 Total rents received or accrued. Add line 2c columns A through D. Enter here and on Part I, line 6, column (A)				0.
4 Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)				
5 Total deductions. Add line 4 columns A through D. Enter here and on Part I, line 6, column (B)				0.

Part V Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.

A _____

B _____

C _____

D _____

	A	B	C	D
2 Gross income from or allocable to debt-financed property				
3 Deductions directly connected with or allocable to debt-financed property				
a Straight line depreciation (attach statement)				
b Other deductions (attach statement)				
c Total deductions (add lines 3a and 3b, columns A through D)				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach statement)				
5 Average adjusted basis of or allocable to debt-financed property (attach statement)				
6 Divide line 4 by line 5	%	%	%	%
7 Gross income reportable. Multiply line 2 by line 6				
8 Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A)				0.
9 Allocable deductions. Multiply line 3c by line 6				
10 Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)				0.
11 Total dividends-received deductions included in line 10				0.

Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions)

1. Name of controlled organization		2. Employer identification number	Exempt Controlled Organizations			6. Deductions directly connected with income in column 5
			3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	
(1)						
(2)						
(3)						
(4)						
Nonexempt Controlled Organizations						
7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10		
(1)						
(2)						
(3)						
(4)						
			Add columns 5 and 10. Enter here and on Part I, line 8, column (A)	Add columns 6 and 11. Enter here and on Part I, line 8, column (B)		
Totals			0.	0.		

Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add cols 3 and 4)
(1)				
(2)				
(3)				
(4)				
		Add amounts in column 2. Enter here and on Part I, line 9, column (A)		Add amounts in column 5. Enter here and on Part I, line 9, column (B)
Totals		0.		0.

Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1	Description of exploited activity: _____		
2	Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A)	2	
3	Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B)	3	
4	Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7	4	
5	Gross income from activity that is not unrelated business income	5	
6	Expenses attributable to income entered on line 5	6	
7	Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12	7	

FORM 990-T (A)	OTHER INCOME	STATEMENT 1
DESCRIPTION		AMOUNT
ROYALTY INCOME		19,981.
TOTAL TO SCHEDULE A, PART I, LINE 12		19,981.

FORM 990-T (A)	OTHER DEDUCTIONS	STATEMENT 2
DESCRIPTION		AMOUNT
EXTRACTION EXPENSES		2,874.
TOTAL TO SCHEDULE A, PART II, LINE 14		2,874.

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM	Taxpayer identification number (TIN) ** - ***9631
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 2100 1ST AVENUE NORTH, 700	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. BIRMINGHAM, AL 35203	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
Form 990-T (corporation)	07		

CHRIS LUKETIC

• The books are in the care of ▶ **2100 1ST AVENUE N., STE 700 - BIRMINGHAM, AL 35203**

Telephone No. ▶ **205-327-3815** Fax No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 15, 2023**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ calendar year **2022** or
▶ tax year beginning _____, and ending _____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. THE COMMUNITY FOUNDATION OF GREATER BIRMINGHAM	Taxpayer identification number (TIN) ** - ***9631
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 2100 1ST AVENUE NORTH, 700	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. BIRMINGHAM, AL 35203	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 7

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
Form 990-T (corporation)	07		

CHRIS LUKETIC

• The books are in the care of ▶ **2100 1ST AVENUE N., STE 700 - BIRMINGHAM, AL 35203**

Telephone No. ▶ **205-327-3815** Fax No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 15, 2023**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ calendar year **2022** or
▶ tax year beginning _____, and ending _____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	2,596.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	12,784.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.