Form	990
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### PUBLIC DISCLOSURE COPY Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Open to Public

Inspection

905,

Yes

309

No

19

19

16

0.

0.

0

0.

Yes X No

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.

Department of the Treasury Internal Revenue Service

> Check if applicable Address change

Name

change Initial return

Final return/ termin-ated

Amended

return Applica-tion pending

В

and ending A For the 2022 calendar year, or tax year beginning C Name of organization D Employer identification number PHILANTHROPY OHIO 31-1111842 Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number 500 S FRONT STREET 900 614-224-1344 City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ COLUMBUS, OH 43215 H(a) Is this a group return F Name and address of principal officer: DEBORAH AUBERT THOMAS for subordinates? SAME AS C ABOVE **H(b)** Are all subordinates included?

Tax-exempt status: X 501(c)(3) 501(c) ( (insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions WWW.PHILANTHROPYOHIO.ORG J Website: H(c) Group exemption number K Form of organization: X Corporation L Year of formation: 1984 M State of legal domicile: OH Trust Association Other Part I Summary Briefly describe the organization's mission or most significant activities: TO PROVIDE LEADERSHIP FOR 1 Activities & Governance ORGANIZED PHILANTHROPY IN OHIO. 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 ..... Number of independent voting members of the governing body (Part VI, line 1b) 4 4 ..... Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5 5 ·.... Total number of volunteers (estimate if necessary) 149 6 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12, 7a ..... b Net unrelated business taxable income from Form 990-T, Part I, line 11 7h Prior Year **Current Year** 1,847,123. 1,544,805. Contributions and grants (Part VIII, line 1h) 8 ····· Revenue 216,131. 313,538. 9 Program service revenue (Part VIII, line 2g) ..... ..... 83,453. 42,103. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 6,013. 4,863. 11 905,309 2,152,720. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 Ο. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. Benefits paid to or for members (Part IX, column (A), line 4) 14 1,225,385. 1,287,956. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)

es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,225,385.	1,287,956.
S	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
ē	b	Total fundraising expenses (Part IX, column (D), line 25) 268, 255.		
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	964,888.	666,034.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,190,273.	1,953,990.
	19	Revenue less expenses. Subtract line 18 from line 12	-37,553.	-48,681.
or Ses			Beginning of Current Year	End of Year
sers llanc	20 21 22	Total assets (Part X, line 16)	1,895,129.	1,725,898.
ASS d Ba	21	Total liabilities (Part X, line 26)	375,867.	482,093.
	22	Net assets or fund balances. Subtract line 21 from line 20	1,519,262.	1,243,805.

#### 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 completen Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

	Alehan Muhit Thomas	11/13/2023								
Sign	Signature of office		Date							
	Type or print name and title									
	Print/Type preparer's name Preparer's signature	Date	Check	PTIN						
Paid	JANE PFEIFER JANE PFEIFER	07/25	/23 self-employed	P0122537	7					
Preparer	Firm's name CLARK, SCHAEFER, HACKETT & CO.		Firm's EIN 31-	-0800053						
Use Only	Firm's address 4449 EASTON WAY, SUITE 400									
	COLUMBUS, OH 43219		Phone no.614-	-885-2208						
May the I	RS discuss this return with the preparer shown above? See instructions			X Yes	No					
				_ 000/						

LHA For Paperwork Reduction Act Notice, see the separate instructions. 232001 12-13-22

rm	990 (2022) PHILANTHROPY OHIO 31-111842 Page
ar	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
	Briefly describe the organization's mission:
	TO LEAD AND EQUIP OHIO PHILANTHROPY TO BE EFFECTIVE PARTNERS FOR
	CHANGE IN OUR COMMUNITIES.
_	
	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ? Yes 🔀 N
	If "Yes," describe these new services on Schedule O.
	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
	ADVOCATING: SUPPORTING POLICIES TO STRENGTHEN THE CHARITABLE SECTOR,
	IMPROVE LOCAL COMMUNITIES AND LIFT UP THE ULTIMATE BENEFICIARIES OF
	PHILANTHROPIC RESOURCES. PHILANTHROPY OHIO (POH) LEAD AND EQUIPPED OUR
	MEMBERS BY:
	(1) BRINGING PHILANTHROPY'S VOICE TO KEY EXTERNAL AUDIENCES INCLUDING
	MEDIA, STATE AND FEDERAL POLICY MAKERS AND THROUGH INTERACTION WITH
	OHIO'S STATEWIDE OFFICIALS AND CABINET STAFF, INCLUDING SERVING ON THE
	OHIO ATTORNEY GENERAL'S CHARITABLE ADVISORY COUNCIL AND GOVERNOR
	DEWINE'S OHIO PHILANTHROPY COLLECTIVE;
	(2) INFLUENCING STATE POLICY REFORM IN EDUCATION, HEALTH AND HOUSING
	THROUGH MEMBER-DRIVEN COALITIONS;
	(3) INFLUENCING STATE POLICY REFORM RELATED TO CHARITABLE GIVING
	(Code:) (Expenses \$610,399. including grants of \$) (Revenue \$)
	EDUCATING: SHARING THE WISDOM FROM LOCAL EXPERTS, NATIONAL THOUGHT
	LEADERS AND PEERS THROUGH PROGRAMS AND KNOWLEDGE RESOURCES THAT IMPROVE
	PHILANTHROPIC PRACTICES. IN 2022 POH OFFERED 64 PROGRAMS, SERVING OVER
	1,300 PARTICIPANTS, INCLUDING THE PHILANTHROPY FORWARD '22 CONFERENCE.
	IN ADDITION TO THE ANNUAL CONFERENCE, POH OFFERED PROGRAMS IN CORE
	COMPETENCY AREAS (COMMUNICATIONS, FINANCE & INVESTMENTS, GOVERNANCE,
	GRANTMAKING, ETC.) AND BY JOB POSITION (SCHOLARSHIP MANAGERS, EXECUTIVE
	DIRECTORS, ETC.) AND INTEREST AREAS (EQUITY PEER GROUPS, EDUCATION
	FUNDERS, ETC.). POH ALSO ENHANCED KNOWLEDGE BY ANSWERING 53 REQUESTS
	FOR INFORMATION IN 2022 AND PRODUCING 136 NEWSLETTERS AND SPECIALIZED
	PUBLICATIONS INCLUDING A REGION- AND OHIO-SPECIFIC COMPENSATION REPORT
	AND THE OHIO GIVES REPORT.
	(Code:) (Expenses \$122,621. including grants of \$) (Revenue \$)
	CONVENING: ENGAGING PEOPLE IN MEANINGFUL CONVERSATIONS, PROVIDING SPACE
	FOR LEARNING FROM EACH OTHER, COLLABORATING AND STRENGTHENING
	RELATIONSHIPS IN ORDER TO AMPLIFY IMPACT. POH MAINTAINS SEVERAL
	ELECTRONIC LISTSERVS THAT ALLOW MEMBERS TO INTERACT WITH PEERS, POSING
	QUESTIONS AND SEEKING ADVICE. IN 2022, POH MEMBERS CONNECTED THROUGH
	THE LISTSERVS, WITH 136 QUESTIONS AND ANSWERS PROVIDED. PEER GROUPS MET
	VIRTUALLY AND IN PERSON, ORGANIZED BY JOB ROLE (SCHOLARSHIP MANAGERS,
	EXECUTIVE DIRECTORS, ETC.) AND INTERESTS (EQUITY PEER GROUPS, EDUCATION
	FUNDERS, ETC.).
	Other program services (Describe on Schedule O.)
	Total program service expenses 1,140,615. Form 990 (20
	CEE COUEDULE O FOD COMMINIAMION (C)
	12-13-22 SEE SCHEDOLE O FOR CONTINUATION(S) 2
/	25 758050 4000000-181 2022.04010 PHILANTHROPY OHIO 4000
I	$z_{\text{J}}$ (30030 4000000-101 $z_{\text{J}}$ $z$

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Form	990	(2022)

 Form 990 (2022)
 PHILANTHROPY
 OHIO

 Part IV
 Checklist of Required Schedules
 Checklist

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		v	)
_	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			v
6	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		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</i> "Yes," <i>complete Schedule D</i> , <i>Part I</i>	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		
'	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	<b>⊢'</b> −		
U	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
•	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
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? If "Yes," complete Schedule D, Part VII	11b		<u>X</u>
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
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? If "Yes," complete Schedule D, Part IX			
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Ă	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			v
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	111		<u>X</u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	10-	v	
h	Schedule D, Parts XI and XII	128		
D		12h		x
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			X
14a				X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
-	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		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? If "Yes," complete Schedule F, Parts II and IV	15		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? If "Yes," complete Schedule F, Parts III and IV	16		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? If "Yes," complete Schedule G, Part I. See instructions	17		<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	e of its total       11c		<u>X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? // "Yes, "			37
	complete Schedule G, Part III			X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H			X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic approximation of Rate IX, column (A), line 12, (f IV/column (A), line 12, (f IV/column (A), line 12, (f IV/column))	0.4		х
220000	domestic government on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I. Parts I and II</i>		990 /	
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 Form 990 (2022)
 PHILANTHROPY
 OHIO

 Part IV
 Checklist of Required Schedules (continued)

22			Yes	No
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			v
23	Part IX, column (A), line 2? <i>If</i> "Yes," <i>complete Schedule I, Parts I and III</i> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current	22		x
23	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	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			<u> </u>
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a	X	Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	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? If "Yes," complete Schedule L, Part 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? If "Yes," complete			
	Schedule L, Part 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? If "Yes," complete Schedule L, Part II	26		<u>X</u>
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			v
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>	00-		х
L	"Yes," complete Schedule L, Part IV	28a 28b		X
	A family member of any individual described in line 28a? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	200		<u> </u>
C	"Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	25		
00	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
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? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
57				Х
54	Part V, line 1	34		
	Part V, line 1	34 35a		X
35a				<u>X</u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?			<u>X</u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		<u> </u>
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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</i> "Yes," <i>complete Schedule R, Part V, line 2</i>	35a		X X
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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</i> "Yes," <i>complete Schedule R, Part V, line 2</i> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i> Did the organization conduct more than 5% of its activities through an entity that is not a related organization	35a 35b		X
35a b 36	Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35a 35b		
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35a b 36 37 38	Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> 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> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	35a 35b 36	x	X
35a b 36 37	Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> 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> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	35a 35b 36 37	x	X
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35a b 36 37 38 Pai	Did the organization have a controlled entity within the meaning of section 512(b)(13)?         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)? If "Yes," complete Schedule R, Part V, line 2         Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?         If "Yes," complete Schedule R, Part V, line 2         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?       If "Yes," complete Schedule R, Part VI         Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?         Note: All Form 990 filers are required to complete Schedule O         tv       Statements Regarding Other IRS Filings and Tax Compliance         Check if Schedule O contains a response or note to any line in this Part V         Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	35a 35b 36 37 38		x x
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35a b 36 37 38 Par 1a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?         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)? If "Yes," complete Schedule R, Part V, line 2         Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?         If "Yes," complete Schedule R, Part V, line 2         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?       If "Yes," complete Schedule R, Part VI         Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?         Note: All Form 990 filers are required to complete Schedule O         tv       Statements Regarding Other IRS Filings and Tax Compliance         Check if Schedule O contains a response or note to any line in this Part V         Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	35a 35b 36 37 38		x x

2022.04010 PHILANTHROPY OHIO

Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, the set of the calendar yaser ending with or which the year covered by this return in the set of the calendar year ending with or which the year covered by this return in the set of the calendar year ending with or which the year covered by this return in the set of the calendar year ending with or which the year covered by this return in the set of th		990 (2022) PHILANTHROPY OHIO	31-1111	842	P	<sub>age</sub> 5
2a         Enter the number of employees reported on form W3. Transmittal of Wage and Tax Statements.         2a         16           b If a least one is reported on line 2a, did the organization file all repaired federal employment tax returns?         2b	Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)				
The status of the calendary year ending with or within the year overeal by this return     2a     1.6       Bo Diff the capacitation have unelated business gross income of \$1,000 or more during the year?     3a     3a       Bo Diff the capacitation have unelated business gross income of \$1,000 or more during the year?     3a     3a       Bo Diff the capacitation have unelated business gross income of \$1,000 or more during the year?     3a     3a       Bo Diff the capacitation have unelated business gross income of \$1,000 or more during the subort/power, a financial account?     4a     X       Bo Diff the capacitation approximates for FinGEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).     5a     X       Bo Dam te capacitation approximation fait it was or its a party to a prohibited tax sheat the transaction?     5a     X       Bo Dam te capacitation fait it was or its approximations?     5a     X       Bo Dam te capacitation fait was or its approximation?     5a     X       Bo Dam te capacitation fait was or its approximation?     5a     X       Bo Dam te capacitation fait was or its approximation?     5a     X       Bo Dam te capacitation fait was or its approximation?     5a     X       Bo Dam te capacitation fait was or its approximation?     5a     X       Bo Dam te capacitation fait was or its approximation?     5a     X       Bo Dam te capacitation fait was or its approximation?     5a     X <th></th> <th></th> <th>1 1</th> <th></th> <th>Yes</th> <th>No</th>			1 1		Yes	No
b         If a least one is reported on time 2a, did the organization file all required federal employment tax returns?         gb         X           b         Did the organization have unified business grows income of \$1,000 or more during the year?         gb         X           b         If "Yes," has it filed a Form 980-T for this year? // *M* to line 30, provide an axplanation on Schedule O         gb         X           b         If "Yes," that it filed a Form 980-T for this year? // *M* to line 30, provide an axplanation on Schedule O         gb         X           b         If "Yes," that it filed a Form 980-T for this year? // *M* to line 30, provide an axplanation on Schedule O         gb         X           b         If "Yes," that the name of the foreign country         gb         X         X           b         If "Yes," the the name of the foreign Country         gb         X           b         Did any taxability and provide that as how any growther than \$100,000, and did the organization have any comparization have any time during the tax year?         gb         X           b         If "Yes," the the organization have any any that are normally greater than \$100,000, and did the organization scillat any contributions that may receive deductible contributions and prevents than \$100,000, and did the organization scillat any contribution scillat are anomally greater than \$100,000, and did the organization scillat any contribution and prevents than \$100,000, and did the organization have requive than \$100,000,000,000,000,000,000,000,000,000			10			
3a         Did the organization have unrelated business gross income of \$1,000 or more during the year?         3a         X           b         If 'Yes,' has it lifed a Form 990 T for this year?         3b         X           b         If 'Yes,' indicating the calendary year, did the organization have an interest in, or a signature or other authorty over, a francial account in a foreign country use the name of the foreign country.         4a         X           b         If 'Yes,' indications to the organization in the twas or is a party to a prohibit dix schemation tax year?         5a         X           b         If any taxable party notify the organization in the organ					v	
b       If Yes, * has filled a From 960-Tor this year?       Yes, * has filled a from 960-Tor this year?       30         d       At any time during the calandary year, d dthe organization have an interest in, or a signature or after authory over a financial account;       42       X         b       If Yes, * inster the name of the foreign country (such as a bank account, securities account, or other financial account; (FBAR).       5a       X         50       Was the organization that any time during the tax year?       5a       X         50       Was the organization that was or is a part to a prohibited tax balaet transaction at any time during the tax year?       5a       X         60       Doet any toxation all gross recepts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?       6a       X         10       If Yes, 'i whet the organization that any time during the supervised on services provided to the payor?       7a       X         10       If Yes, 'i what the organization tax deductible as charitable contributions or services provided to the payor?       7a       X         11       Organization taxity the down of the value of the position an express atternent that such contributions or griffs       7a       X         11       Tor advised taxity or otherwise dispose of tangble personal property for which it was required?       7a       X         11					<u> </u>	v
4       At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a difficult to equipation of the foreign country (such as a bank account, securities account, or other financial accounts (FBAR). <ul> <li>bit Yes," name the name of the foreign country (such as a bank account, securities account, or other authority over, a difficult of any bandle party rots if the organization that it was or is a party to a prohibited tax shelter transaction?</li> <li>bit any bandle party notify the organization the from 888-67.</li> <li>bit any bandle party notify the organization in form 888-67.</li> <li>bit any bandle party notify the organization in form 888-67.</li> <li>bit any bandle party notify the organization in commodity greater than \$100,000, and did the organization sector any contributions flaw were not tax deductibles or contributions and excess statement that such contributions or griffs were not tax deductibles or contributions and excess statement that such contributions or griffs</li> <li>bit the organization neitiky the down of the value of the goods or services provided?</li> <li>ci tak eductible?</li> <li>did the organization neitiky the down of the value of the goods or services provided?</li> <li>ci tak eductible?</li> <li>did the organization neitiky the down of the value of the goods or services provided?</li> <li>did the organization exceeds a contribution of again parts and periodial benefit contract?</li> <li>did the organization receives a partice or indirectly, to pay premiums on a personal forefit contract?</li> <li>did the organization neitiky the down of the value of the down of the value of dub and the good of the value of the down of the valu</li></ul>						Δ
If manual account in a foreign country (such as a bank account, securities account, or other financial account)?     4a     X       If M Tex, in other the name of the foreign country     5a     5a     5a     5a       Sa Was the organization aparty to a prohibited tax sheart framaction at any time during the tax year?     5a     5a       So Did any taxation aparty to a prohibited tax sheart framaction?     5a     5a       So Did any taxation and on party to a prohibited tax sheart framaction?     5a     5a       So Did any taxation aparty to a prohibited tax sheart framaction?     5a     5a       So Did any taxation sheart and years cereber that are on any proses statement that such contributions cereber any contributions that may receive deductible contributions and print tax accin a provide?     5a       If M Tex, i did the organization include with every solicitation and express statement that such contributions or gliff     5a       If M Tex, i did the organization necelve any funds, directly or indirectly, to pay premiums on a personal benefit contract?     7a       If M Tex, i did the organization necelve any funds, directly or indirectly, to pay premiums on apersonal benefit contract?     7a       If M Tex, i did the organization indirect mather any taxable disfibutions indired steps and paralization select any taxable disfibutions inder section 479(C).     7a       If M Tex, i did the organization necelve any funds, directly or indirectly, to pay premiums on apersonal benefit contract?     7a       If M Tex, i did the organization necelve any funds, di				3b		
b       17 %s; "near the name of the foreign country.         See instructions for filing requirements for FINCEN FORE THAL, Report of Foreign Bank and Financial Accounts (FBAR).         58       Was the organization a party to a prohibited tas shefter transaction?       56         50       16 was the organization have annual gross receipts that are normally greater than \$100,000, and ibit the organization for the organization is charable contributions?       56         60       055 the organization have annual gross receipts that are normally greater than \$100,000, and ibit the organization for the organization include with every solicitation an express statement that such contributions of glfs were not tax douctables or charable contributions?       68         70       Organizations that may receive deductable contributions under section 170(c).       74       X         8       If "Yes," idd the organization include with every solicitation an express statement that such contributions or glfs were not tax douctables as charable contributions and property tor whole with twein required to file form 882/2       76       74       X         9       If "Yes," idd the organization notify the donor of the value of the gords are services provided?       76       X         10       If "Yes," indicate the number of Forms 8282? Ifed during the year       7d       7d       X         10       If "Yes," indicate the contribution of garaphase, or other values of the organization field are normable as property. dift morganization field are normothout as ordised funds.			-			v
See Instructions for filling requirements for FinCEN Form 114. Report of Foreign Bank and Financial Accounts (FBAR).       See         Sa Was the organization approved by approved by approximate that a vary time during the tax year?       So       X         So Did ary taxable party notify the organization that it was or is a party to a prohibited tax shelfs and primate that such contributions shelf taranaction?       So       X         So Did ary taxable party notify the organization that it was or is a party to a prohibited tax shelfs that are normally greater than \$100,000, and did the organization adjusts of the organization include with werey solicitation an express statement that such contributions or glifs were not tax deductible?       So       X         Organizations that may receive deductible contributions under section 170(c).       Bit the organization neceive apagement in excess ol 5% made party as a contribution and party for goods and services gradued to the payor?       7a       X         Did the organization neceive any funds, directly or indirectly, to pay premiums on a parsonal beeneft contract?       7e       X         Did the organization neceive any funds, directly or indirectly, to pay premiums on a parsonal beeneft contract?       7e       X         Did the organization neceive any funds, directly or indirectly, to pay premiums on a parsonal beeneft contract?       7e       X         Did the organization neceive any funds, directly or indirectly, to pay premiums on a parsonal beeneft contract?       7e       X         Did the organization neceive any funds, dincetly or			count)?	4a		~
Sa         Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?         Sa         X           b         Did any taxable party notify the organization that twos or is a party to a prohibited tax shelter transaction?         Sa         X           c         If "Yes" to line 5a or 5b, did the organization file Form 8886-17?         Sa         X           c         Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization select any contributions that were not tax deductible on thick the every solicitation an express statement that such contributions or gifts were not tax deductible contributions under section 77(c).         Sa         X           a         Did the organization notify the donor of the value of the codo or services provided?         To         To           a         Did the organization code any funds, directly or indirectly, to pay premiums on a personal bronest transaction receive da contribution of qualified intellectual property, did the organization file a form 10482?         To         X           d         If "Yes," indicate the number of forms 8828 filed during the year?         To         X         X           g         If the organization receive a contribution of qualified intellectual property, did the organization file a form 10482?         To         X           g         If the organization make any taxis distributions on ther section and party file groups anoganization file a form 10482?         To <t< td=""><td></td><td>· · · · · · · · · · · · · · · · · · ·</td><td></td><td></td><td></td><td></td></t<>		· · · · · · · · · · · · · · · · · · ·				
b       Def any taxable party notity the organization that it was or is a party to a prohibited tax shelter transaction?       Set         c       If "Yes' to line Sa or 5b, did the organization file form 8888-17?       Set         G       Des the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solution and provide the expanization include with every solicitation an express statement that such contributions or gifts       Set         b       If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts       Set         a       Did the organization receive a payment in excess of \$75 made party as a contribution or provide?       Te         b       If "Yes," did the organization on thy the donor of the value of the goods or services provided?       Te         b       Did the organization sele, excess balance, or otherwise dispose of tangible personal property for which it was required?       Te         c       Did the organization neceive a contribution of qualified intelectual property, did the organization file of Tem 8898 as required?       Te         f       Did the organization neceived a contribution of qualified intelectual property, did the organization file a form 1086.0?       Te         f       Byposoring organization make any taxable distributions and escelion 4966?       Spa         g       Sponsoring organization make any taxable distributions and escelion 4966?       Spa         g<				Ea		v
c       If Yes* to line 5a or 5b, did the organization file Form 8886 T7       5c         6a       Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solieit ary contributions that were not tax deductible or that deductible contributions that were not tax deductible contributions under section 70(c).       5c         b       If Yes," did the organization include with every solicitation an express statement that such contributions or glifs were not tax deductible contributions under section 70(c).       6a       X         b       If Yes," did the organization neitry the donor of the value of the goods or services provided?       7a       X         c       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal property for which it was required to the Form 8828?       7a       X         d       If Yes," indicate the number of Forms 8282 filed during the year       7d       7a       X         d       If the organization receive any funds, directly or indirectly, on a personal property for which it was required?       7a       X         f       Ib the organization receive accontribution of cars, boats, anplanes, or other vehicles, did the organization file a Form 1098-C?       7a       X         f       If the organization receive access business oblings at any the doming the veir?       8       9         gonosring organization receive access business oblings at any the doming the veir?       9a       9a <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>						
Ge         Des 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?         Sa         X           b         If "Yes," did the organization include with every solicitation an express statement that such contributions or giffs were not tax deductible?         Sa         X           c         Organizations that may receive deductible contributions under section 170(c).         Bit         Bit         Yes," did the organization notify the donor of the value of the goods or services provided?         7a         X           c         Did the organization notify the donor of the value of the goods or services provided?         7d         X           d         If "Yes," did the organization receive any functs, directly or indirectly, on a personal benefit contract?         7d         X           d         If the organization received a contribution of qualified intellectual property, did the organization file Form 8890 as required?         7a         X           g         If the organization neceived a contribution of cars, boats, alplanes, or other vehicle, did the organization and the secons solution granization received a contribution of any, boats, alplanes, or other vehicle, did the organization file Form 8908 as required?         7a         X           g         If the organization received a contribution of cars, boats, alplanes, or other vehicle, did the organization file Form 8908 (T)         9a         9b         9a						- 23
any contributions that were not tax deductible as charitable contributions?     6a     X       b if 'Yes, ' did the organization include with every solicitation an express statement that such contributions or gifts     6b       7 Organizations that may receive deductible contributions under section 170(c).     6b       a Did the organization cericle symmet in excess of S7 made party as contribution and party for goods and services provided?     7c       c Did the organization notity the donor of the value of the goods or services provided?     7c     X       d If 'Yes,' indicate the number of Forms 8282 filed during the year     2d     7d     X       d Did the organization necelve any funds, directly or indirectly, on a personal benefit contract?     7c     X       g If the organization neceved a contribution of sus, boats, anjenses, or there values, diff the organization facewed a contribution of ask, boats, anjenses, or there values, diff the organization file & Form 1098-07     7f     X       g If the organization neceves a contribution of auxiled funds. Did a donor advised funds.     8     8     8       9 Sponsoring organization meak ens boldings at any three during the year?     8     8     8       9 Sponsoring organization meak ens boldings at any three during the year?     8     8     8       9 Sponsoring organization meak ens taxable distitutions of under solutions or related person?     9e     9e       10 Section 501(c)(2) organization.     100     100     100 <td></td> <td></td> <td></td> <td>50</td> <td></td> <td></td>				50		
b       If "Yes," did the organization include with every solicitation an express statement that such contributions or giffs       6b         b       Organizations that may receive deductible contributions under section 170(c).       7a       X         b       If "Yes," did the organization receive a payment in excess of \$75 made partly as a contribution and partly for pools and serves growled to the payor?       7a       X         c       Did the organization receive a payment in excess of \$75 made partly as a contribution sone perconal broefft contract?       7d       X         d       If "Yes," did the organization receive any torks, directly or indirectly, to pay premiums on a perconal benefit contract?       7e       X         d       If We organization receive any torks, directly or indirectly, to pay premiums on a perconal benefit contract?       7e       X         f       It do organization receive a contribution of qualified intellectual property, diff the organization files are provided to the sponsoring organization maximizing door advised fund maintained by the sponsoring organization make any taxable distributions inder section 4966?       9a         g       Did the sponsoring organization make any taxable distributions inder section 4966?       9a         g       Goors income from ather sources. Enter:       10a       10a         a       Initiation fees and capital contributions injuded on Part VIII, line 12, or public use of club facilities       10a         g Cross income from mem				60		x
were not tax deductible?     6b       7     Organizations that may receive adductible contributions under section 170(c).     7a       X     Did the organization neelve a payment in excess of \$75 made parity as a contribution and parity for goods and services provided     7b       10     "Yes," did the organization neity the donor of the value of the goods or services provided     7c     X       10     Tyes," did the organization receive acy numbers of space of tangible personal property for which it was required to file Form 8282?     7c     X       11     Tyes," indicate the number of Forms 8282 filed during the year     7d     X       12     Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?     7r     X       11     the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file on B898 as required?     7h     X       12     If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098 C?     7h     7h       13     Sponsoring organization have excess business holdings at any time during the year?     9a     9b       14     the organization neeved nary time during the year?     9a     9b       15     Section 501(c)(7) organizations. Enter:     10a     10a       16     the sources or shareholders     11a     10a       16				Ua		
7       Organizations that may receive deductible contributions under section 170(c).       a) bit the organization receive a payment in excess of \$75 made parthy as a contribution and party for goods and services provided to the payor?       7a       X         b) If 'Yes, 'Id the organization notify the doors of the value of the goods or services provided?       7c       X         c) Did the organization ontify the doors of the value of the goods or services provided?       7c       X         d) If 'Yes, 'Indicate the number of Forms 8282? filed during the year       7d       X         g) Did the organization receive any funds, directly or indirectly or a personal benefit contract?       7f       X         g) If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-0?       7n       X         g) Sponsoring organization, wing or advised funds.       Did the organization and intaining door advised funds.       Did the organization maintaining door advised funds.       Did the sponsoring organization make a distributions inder section 496?       9a         g) Sponsoring organization make a distribution is der section 496?       9a       9b       9b       9b         g) Gross income from members or shareholders       11a       10a       10				6h		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided       7a       X         b If Yes, "Id the organization notify the donor of the value of the goods or services provided       7c       X         b Did the organization set, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         d If Yes, "Indicate the number of Forms 8282 filed during the year       7d       7e       X         f Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7f       X         g If the organization receive at contribution of cars, boats, aiplanes, or other vehicles, did the organization file Form 8090 as required?       7n       X         g If the organization received a contribution of cars, boats, aiplanes, or other vehicles, did the organization file Form 8090 as required?       7n       X         g If the organization make any taxable distributions tindef section 4966?       9a       9       9b       10b       9b       10b       9b       10b       9b       10b       9b       10b       9b       10b       10b </td <td></td> <td></td> <td></td> <td>00</td> <td></td> <td></td>				00		
b       #"Yes," did the organization netily the donor of the value of the goods or services provided?       Tb         c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form 8282?       Tc       X         d       I"Yes," Indicate the number of Forms 8282 filed during the year       Tc       X         d       II "Yes," Indicate the number of Forms 8282 filed during the year       Td       Td         F       Did the organization receive any tunds, directly or indirectly, to pay premiums on a personal benefit contract?       Tr       X         f       Td the organization received a contribution of qualified intellectual property, did the organization flag and a contrabuted of cars, basts, alphanes, or dethe organization flag a Form 1098-0?       8         8       Sponsoring organization make any taxable distributions funder section 4966?       9a       9a         9       Did the sponsoring organization make any taxable distributions funder section 4966?       9a       9b         10       Boros rincepts, included on Form 90.0 return with the set of the form form of the sources against anounts due or received from them)       11a       10a       10a         12       Section 501(c)(12) organizations. Enter:       10b       11a       10b       11a         13       Gercis received, from them)       11b       11a       12a       12a			es provided to the payor?	72		x
c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         d       If "Yes," indicate the number of Forms 8282 filed during the year       7d       X         d       If where," indicate the number of Forms 8282 filed during the year pay premiums on a personal benefit contract?       7e       X         f       Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7f       X         g       If the organization neceived a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8899 as required?       7f       X         g       Sponsoring organization maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make a very taxable distributions (ad a section 49667)       9a       9a         g       Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?       9b       9b         10       Section 501(c)(7) organizations. Enter:       10a       10b       10b       10b         11       Section 6047(c) organizations. Enter:       11a       10b						
to file Form 8282?       7c       X         d If "Yes," indicate the number of Forms 8282 filed during the year       7d       7d       X         d If Yes," indicate the number of Forms 8282 filed during the year       7d       X       X         f Did the organization receive any tunds, directly or indirectly, on a personal benefit contract?       7e       X         g If the organization received a contribution of qualified intellectual property, did the organization for earch back a sipplanes, or durine vehicles, did the organization flat a control of cars, back a sipplanes, or durine vehicles, did the organization flat a control of cars, back a sipplanes, or durine vehicles, did the organization flat a control of cars, back a sipplanes, or durine vehicles, did the organization flat a control flat donor advised funds.       9a         a Sonosoring organizations maintaining door advised funds.       9a       9a       9a         a Did the sponsoring organization make any taxable distributions under section 4966?       9a       9a       9b         b Sonosoring organizations. Enter:       a initiation fees and capital contributions included on Part VIII, line 12.       10a       10b       10b         section 501(c)(12) organizations. Enter:       a forse income from them sources. (Do not net amounts due or paid to other sources against amounts due or realved from them).       11a       10b       12a         2 Soction 501(c)(2) organizations. Enter:       a is the organization receled on issure a size size size sissures.				10		
d ff "Yes," indicate the number of Forms 8282 filed during the year       Td         e Did the organization receive any funds, directly or indirectly, to pay presnums on a personal benefit contract?       Te       X         f the organization, during the year, pay premiums, directly or on personal benefit contract?       Td       X         g if the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?       Tg       X         S ponsoring organizations maintaining door advised funds.       a doora advised fund and a doora advised fund anintained by the sponsoring organization make an distributions on a dvise of funds.       B         9 Sponsoring organization makes and distributions on a dvise of funds.       B       B         9 Sponsoring organizations maintaining doora advised funds.       B       B       B         9 Sponsoring organizations maintaining doora advised funds.       B       B       B       B         9 Sponsoring organizations make a distribution to a dooror advisor, or related person?       Bo       B			required	70		x
e       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         f       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7r       X         f       Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g       X         f       Ht the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?       7n       X         8       Sponsoring organizations maintaining donor advised funds.       Did a chore advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       9a       9         9       Sponsoring organization make any taxable distributions under section 4966?       9a       9         10       did the sponsoring organization make any taxable distributions under section 4966?       9a       9b         10       section 501(c)(7) organizations. Enter:       10a       10a       10a       10a         11       Section 501(c)(12) organizations. Enter:       11a       10b       10b       11b       12a         12       Section 501(c)(12) organizations. Enter:       11a       10a       11b       12a       12a       12a       12a       12a       12a			74	10		
f       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7i       X         g       If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?       7g       7g         8       Formation received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7n       7n         9       Sponsoring organization maintaining donor advised funds.       8       9         9       Sponsoring organization make any taxable distributions under section 4966?       9a         10       bid the sponsoring organization make a distribution to a donor donor advisor, or related person?       9b         10       Section 501(c)(7) organizations. Enter:       10a       10b         11       Bestion from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       12a         12       Section 501(c)(2) organizations. Enter:       12b       12a       12a         13       Section 501(c)(2) organizations. Enter:       11a       12b       12a         14       Section 501(c)(2) organizations. Enter:       12b       12b       12a       12a         14       Section 501(c)(2) organization theres. Its he organization filing Form 990 in lileu of Form 1041?       12a			I	70		x
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h       If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h         8       Sponsoring organizations maintaining donor advised funds.       Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       8a         9       Sponsoring organizations maintaining donor advised funds.       9a         10       Did the sponsoring organization make any taxable distributions under section 4966?       9a         10       Section 501(c)(7) organizations. Enter:       10a       10a         11       Section 501(c)(17) organizations. Enter:       10a       10b         12       Section 501(c)(17) organizations. Enter:       11a       11b         13       Section 4977(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         14       Section 501(c)(2) organizations is received or accrued during the year       12b       11b         13       Section 501(c)(2) organization is received or accrued during the year       12a       12a         14       TVes," enter the amount of tax-exempt interest received or accrued during the year       12b       12a         14       Did the organization is locensed to issue qualified health plans in more than one state?       13a       13a         15       TVes," has it						
8       Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?       8         9       Sponsoring organization make excess business holdings at any time during the year?       8         9       Did the sponsoring organization make any taxable distributions under section 4966?       9a         10       Bection 501(c)(7) organizations. Enter:       10a         11       Initiation fees and capital contributions included on Part VIII, line 12, for public use of club facilities       10b         11       Section 501(c)(12) organizations. Enter:       10a       11a         12       Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       12a         12       Section 501(c)(12) organizations interver the accrued during the year       12b       12a         13       Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       12a         12       Section 501(c)(2) qualified nonprofit health insurance issuers.       13a       13a         13       Section 501(c)(2) qualified nonprofit health plans in more than one state?       13a       13a         14       Did the organization is icensed to issue qualified health plans       13b       13a						
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12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b       12b         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13a       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a       13a         Note: See the instructions for additional information the organization must report on Schedule O.       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b       14a       X         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a       X         15       Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       15       X         16       Is the organization an educational institution subject to the section 4968 excise tax on net investment income?       16       X         17       If "Yes," complete Form 4720, Schedule O.       17       17       17         18       Is the 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?			I1b			
b       If "Yes," enter the amount of tax exempt interest received or accrued during the year       12b       12b         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a         Note: See the instructions for additional information the organization must report on Schedule O.       13b       13a         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b       13c         c       Enter the amount of reserves on hand       13c       14a       X         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a       X         b       If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O       14b       15         15       Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       15       X         If "Yes," see the instructions and file Form 4720, Schedule N.       16       X         Is the organization an educational institution subject to the section 4968 excise tax on net investment income?       16       X         If "Yes," complete Form 4720, Schedule O.       17				12a		
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b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b       13b         c       Enter the amount of reserves on hand       13c       13c         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a       X         b       If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O       14b       14b         15       Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       15       X         If "Yes," see the instructions and file Form 4720, Schedule N.       Is the organization an educational institution subject to the section 4968 excise tax on net investment income?       16       X         If "Yes," complete Form 4720, Schedule O.       17       17       17         17       If "Yes," complete Form 6069.       10       10       10						
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b       If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O       14b         15       Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       15       X         If "Yes," see the instructions and file Form 4720, Schedule N.       16       Is the organization an educational institution subject to the section 4968 excise tax on net investment income?       16       X         If "Yes," complete Form 4720, Schedule O.       17       16       X         If "Yes," complete Form 4720, Schedule O.       17       17         If "Yes," complete Form 6069.       17       17       17				14a		Х
15       Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?       15       X         If "Yes," see the instructions and file Form 4720, Schedule N.       16       X         16       If "Yes," complete Form 4720, Schedule O.       16       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?       17       17         If "Yes," complete Form 6069.       10       10       10       10						
excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 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. 18 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities 19 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities 19 Section 501(c)(21) organizations of an excise tax under section 4951, 4952 or 4953? 10 Section 501(c)(21) organizations of an excise tax under section 4951, 4952 or 4953? 10 Section 501(c)(21) organizations of an excise tax under section 4951, 4952 or 4953? 10 Section 501(c)(21) organizations of an excise tax under section 4951, 4952 or 4953? 10 Section 501(c)(21) organizations of an excise tax under section 4951, 4952 or 4953? 10 Section 501(c)(21) organizations of an excise tax under section 4951, 4952 or 4953? 10 Section 501(c)(21) organizations of an excise tax under section 4951, 4952 or 4953? 10 Section 501(c)(21) organizations of an excise tax under section 4951, 4952 or 4953? 10 Section 501(c)(21) organizations of an excise tax under section 4951, 4952 or 4953? 10 Section 501(c)(21) organizations of an excise tax under section 4951, 4952 or 4953? 10 Section 501(c)(21) organizations of an excise tax under section 4951, 4952 or 4953? 10 Section 501(c)(21) organizations of an excise tax under section 4951 organizations of an						
If "Yes," see the instructions and file Form 4720, Schedule N.       Id       Id       X         If "Yes," complete Form 4720, Schedule O.       Id       X         If "Yes," complete Form 4720, Schedule O.       Id       X         If "Yes," complete Form 4720, Schedule O.       Id       X         If "Yes," complete Form 4720, Schedule O.       Id       Id       X         If "Yes," complete Form 4720, Schedule O.       Id       Id       Id       Id         If "Yes," complete Form 4720, Schedule O.       Id				15		Х
16       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?       16       X         17       If "Yes," complete Form 6069.       17       17						
If "Yes," complete Form 4720, Schedule O.       If "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.			ncome?	16		Х
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?       17         If "Yes," complete Form 6069.       10						
that would result in the imposition of an excise tax under section 4951, 4952 or 4953?       17         If "Yes," complete Form 6069.       10			ities			
If "Yes," complete Form 6069.				17		
				Form	990	(2022)

Ta	Enter the number of voting members of the governing body at the end of the tax year 1a 19		Yes	No
	If there are material differences in voting rights among members of the governing body, or if the governing			
Ŀ.	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0. Enter the number of voting members included on line 1a, above, who are independent 1b 19			
-	5			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	0		x
2	officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision	2		Δ
3				x
	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 5		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6	х	Δ
6 70	Did the organization have members or stockholders?	0	~	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	7-	x	
Ŀ	more members of the governing body?	7a	~	
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			v
•	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:		v	
а	The governing body?	<u>8a</u>	X X	
-	Each committee with authority to act on behalf of the governing body?	8b	~	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			x
00	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Λ
	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		V.	
0-	Distance institution have been been been been set officiate 0	40-	Yes X	No
	Did the organization have local chapters, branches, or affiliates?	10a		
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	1.0	v	
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X X	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	~	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		37	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		37	
	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	Х	
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?			
	The organization's CEO, Executive Director, or top management official	15a	X	
		15b	Х	
	Other officers or key employees of the organization	150		
b	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
b				
b  6a	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 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  6a	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			x
b 6a	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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			X
b 6a b	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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?			X
b I6a b	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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?	<u>16a</u>		X
b I6a b	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.         Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?         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?         tion C. Disclosure         List the states with which a copy of this Form 990 is required to be filed	16a 16b		
b 16a b 6ec	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3):	16a 16b	availab	
b 16a b Sec	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)) for public inspection. Indicate how you made these available. Check all that apply.	16a 16b	availab	
b 16a b Sec 17	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.         Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?         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?         tion C. Disclosure         List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3): for public inspection. Indicate how you made these available. Check all that apply.         X       Own website       X       Upon request       Other (explain on Schedule O)	16a 16b		
b 16a b Sec 17 18	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)) for public inspection. Indicate how you made these available. Check all that apply.	16a 16b		
b 16a b Sec 17 18	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.         Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?         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?         tion C. Disclosure         List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3): for public inspection. Indicate how you made these available. Check all that apply.         X       Own website       X       Upon request       Other (explain on Schedule O)	16a 16b		
b 16a b Sec 17 18	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3): for public inspection. Indicate how you made these available. Check all that apply.   X Own website Another's website X Upon request Other (explain on Schedule O)   Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and statements available to the public during the tax year.	16a 16b		
b 6a b 6ec 17 8	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)) for public inspection. Indicate how you made these available. Check all that apply.	16a 16b		
b 6a b <del>ec</del> 7 8	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3): for public inspection. Indicate how you made these available. Check all that apply.   X Own website Another's website X Upon request Other (explain on Schedule O)   Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and statements available to the public during the tax year.	16a 16b s only)	cial	ble
b 16a b <b>Sec</b> 17 18 19	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)) for public inspection. Indicate how you made these available. Check all that apply.	16a 16b s only)		ble

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.

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PHILANTHROPY OHIO

Form 990 (2022)

Section A. Officers, Directors, Trustees, Key	Employees, a	nd H	ligh	est (	Con	nper	isat	ed Employees		
1a Complete this table for all persons required to										
• List all of the organization's <b>current</b> officers			es (v	vhetl	her i	indiv	idua	lls or organizations), reg	ardless of amount of c	ompensation.
Enter -0- in columns (D), (E), and (F) if no compens										
<ul> <li>List all of the organization's current key en</li> <li>List the organization's five current highest c</li> </ul>										
who received reportable compensation (box 5 of	Form W-2, box	(6 0	f Foi	rm 1	099	-MIS	SC, a	ind/or box 1 of Form 10	99-NEC) of more than	
\$100,000 from the organization and any related o	rganizations.									
List all of the organization's former officers						comp	pens	ated employees who re	eceived more than \$100	,000 of
<ul> <li>reportable compensation from the organization an</li> <li>List all of the organization's former director</li> </ul>						n the	ecar	pacity as a former direct	tor or trustee of the ora	anization.
more than \$10,000 of reportable compensation fr										
See the instructions for the order in which to list t	he persons ab	ove.								
Check this box if neither the organization n	or any related	orga	niza	tion	con	nper	isate	ed any current officer, d	lirector, or trustee.	
(A)	(B)			ຼ ((	C)			(D)	(E)	(F)
Name and title	Average	(do		Pos heck		1 than o	one	Reportable	Reportable	Estimated
	hours per					is both pr/trus		compensation	compensation	amount of
	week (list any			Γ		Γ	,	from the	from related organizations	other compensation
	hours for	direct				Ð		organization	(W-2/1099-MISC/	from the
	related	ee or	Istee			insate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	trust	nal tru		oyee	ompe		1099-NEC)		and related
	below	ndividual trustee or director	In stitutional trustee	cer	Key employee	Highest compensated employee	Former			organizations
	line)	Ind	lnst	Officer	Key	e Hig	For			
(1) DEBORAH AUBERT THOMAS	40.00	-						142 150	0	11 600
PRESIDENT & CEO (2) MARY DUNBAR	40.00	-	-	X				143,150.	0.	11,680.
SENIOR VP OPERATIONS & STRATEGY	40.00	-		x	K –			116,708.	0.	9,568.
(3) LESLIE DUNFORD	1.00			122				110,700.		5,500
CHAIR		x		x				0.	0.	0.
(4) BRADY GROVES	1.00									
VICE CHAIR		x		x				0.	0.	0.
(5) DENISE GRIGGS	1.00									
TREASURER		x		x				0.	0.	0.
(6) STEVEN MOORE	1.00	)								
SECRETARY		Х		Х				0.	0.	0.
(7) ERIC AVNER	1.00									
AT-LARGE		Х		Х				0.	0.	0.
(8) KEITH BURWELL	1.00									
BOARD MEMBER		Х						0.	0.	0.
(9) MEGHAN CUMMINGS	1.00	1								_
BOARD MEMBER		Х		<u> </u>				0.	0.	0.
(10) AMY EYMAN	1.00									
BOARD MEMBER	1 00	х	<u> </u>			-		0.	0.	0.
(11) CONSTANCE HAWK	1.00								0	0
BOARD MEMBER	1 00	X		<u> </u>		<u> </u>		0.	0.	0.
(12) BENJAMIN KROECK	1.00							0	0	0
BOARD MEMBER	1 00	Х	-			-		0.	0.	0.
(13) SU LOK	1.00	x						0.	0	0
BOARD MEMBER (14) MICHELLE LOVELY	1.00	<u> </u>		-		-		0.	0.	0.
BOARD MEMBER	1.00	x						0.	0.	0
(15) JILL MILLER	1.00		-	+		$\vdash$		0.		0.
BOARD MEMBER	L.00	x		1	1			0.	0.	0.
(16) PATRICIA O'BRIEN	1.00			$\vdash$		$\vdash$		0.	0.	0.
BOARD MEMBER	L.00	x		1				0.	0.	0.
(17) ALESHA WASHINGTON	1.00		-	$\vdash$	-	$\vdash$		0.	0.	0.
BOARD MEMBER	<u> </u>	x						0.	0.	0.
232007 12-13-22	I			1	1	1	I			Form <b>990</b> (2022
202001 12-10-22					7					1 0111 (2022

 Form 990 (2022)
 PHILANTHROPY
 OHIO
 31-1

 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

### 18020725 758050 4000000-181

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Form 990 (2022) PHILANTH	ROPY OHI	0							31-111	1842	F	age <b>8</b>
Part VII Section A. Officers, Directors, Tru	stees, Key Em	oloy	ees,	, and	d Hig	ghest	t Co	ompensated Employee	s (continued)			
(A)	(B)				<b>C)</b> ition			(D)	(E)		(F)	
Name and title	Average hours per		not c	heck	more	than o		Reportable	Reportable		stimat	
	week					s both r/truste		compensation from	compensation from related	a	mount. other	
	(list any	tor						the	organizations	cor	npensa	
	hours for	director				g		organization	(W-2/1099-MISC/		from th	
	related	tee or	ustee			ensati		(W-2/1099-MISC/	1099-NEC)	or	ganiza	tion
	organizations	al trus	nal tr		loyee	e comp		1099-NEC)			nd rela	
	below line)	Individual trustee or	In stitutional trustee	Officer	ƙey employee	Highest compensated employee	Former			org	ganizat	ions
	,	Ind	lns	Off	Key	e Hi	For					
(18) KRISTEN ROST	1.00	v						0.	0			0
BOARD MEMBER (19) BRIAN WAGNER	1.00	X						0.	0.	•	_	0.
BOARD MEMBER	1.00	x						0.	0			0.
(20) KAREN WHITE	1.00							0.	0	•		0.
BOARD MEMBER	1.00	x						0.	0.			0.
(21) LISSY RAND	1.00	Δ						0.	0.	•		0.
BOARD MEMBER	1.00	x						0.	0.			0.
									0.	•		<u> </u>
		1										
		1										
		1										
							Ć					
		1										
		1										
1b Subtotal								259,858.	0	. 2	21,2	48.
c Total from continuation sheets to Part V								0.	0			0.
d Total (add lines 1b and 1c)								259,858.	0	. 2	21,2	48.
2 Total number of individuals (including but	not limited to th	ose	liste	d at	oove)	) who	o re	ceived more than \$100,	000 of reportable			
compensation from the organization												2
											Yes	No
<b>3</b> Did the organization list any <b>former</b> office	r, director, trust	ee, k	key e	empl	oyee	e, or	hig	hest compensated emp	loyee on			
line 1a? If "Yes," complete Schedule J for										3		X
4 For any individual listed on line 1a, is the s												
and related organizations greater than \$15										4	X	
5 Did any person listed on line 1a receive or												
rendered to the organization? If "Yes," co	mplete Schedul	e J fo	or si	uch i	perso	on				5		X
Section B. Independent Contractors												
1 Complete this table for your five highest c	•	•							· ·	ation f	rom	
the organization. Report compensation for	the calendar ye	ear e	endir	ng w	ith o	or wit	nin T		ear.			
(A) Name and busines	s address	<b>NT</b> /	ONE	7				<b>(B)</b> Description of s	services		( <b>C)</b> ensatic	n
Name and busilles	0 444/000	INC		<u> </u>			+	Description of a		Soub	Silvan	
							-					
<b>*</b>												
2 Total number of independent contraction		ot 15-	n;+-	d + c	ther				ara than			
2 Total number of independent contractors		JUIN	niteo	J (O	tnos 0		ed	above) who received m				
\$100,000 of compensation from the organ	lization				U	,						

232008 12-13-22

orm 99			OHIO			31-1111	842 Page 9
Part V	/	Statement of Revenue					
		Check if Schedule O contains a response	or note to any lin				
				<b>(A)</b> Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	<b>(D)</b> Revenue excluded from tax under sections 512 - 514
<u>s</u> 1	а	Federated campaigns 1a					
and Other Similar Amounts L			746,636.				
Am		Fundraising events 1c					
ilar		Related organizations 1d	28,500.				
Sim		Government grants (contributions) <b>1e</b>	20,500.				
Jer	T	All other contributions, gifts, grants, and similar amounts not included above <b>1f</b>	769,669.				
Ō	a	Noncash contributions included in lines 1a-1f					
anc	-	Total. Add lines 1a-1f		1,544,805.			
			Business Code				
2		ANNUAL CONFERENCE	611430	259,685.			
Revenue	b	WORKSHOPS/PUBLICATIONS	611430	53,853.	53,853.		
enu	С						
Sev	d						
	e						
		All other program service revenue		313,538.			
3		Total. Add lines 2a-2f		515,550.			
'	•	other similar amounts)		42,103.			42,103.
4		Income from investment of tax-exempt bond p					,
5		Royalties					
		(i) Real	(ii) Personal				
6	а	Gross rents 6a					
	b	Less: rental expenses 6b					
		Rental income or (loss) 6c					
_		Net rental income or (loss)         Gross amount from sales of         (i) Securities	(ii) Other				
1	а						
	h	assets other than inventory <b>7a</b> Less: cost or other basis					
2		and sales expenses					
	с	Gain or (loss) 7c					
		Net gain or (loss)					
8	а	Gross income from fundraising events (not					
		including \$of					
		contributions reported on line 1c). See					
		Part IV, line 18					
		Less: direct expenses 8b					
0		Net income or (loss) from fundraising events Gross income from gaming activities. See					
9	a	Part IV, line 19 9a					
	b	Less: direct expenses 9b					
		Net income or (loss) from gaming activities					
10	а	Gross sales of inventory, less returns					
		and allowances 10a					
		Less: cost of goods sold 10b					
	C	Net income or (loss) from sales of inventory					
	-	MISCELLANEOUS INCOME	Business Code 900099	4,863.			4,863.
	a b		500033	4,003.			<u> </u>
ver	D C						
11 Revenue		All other revenue					
		Total. Add lines 11a-11d		4,863.			
12		Total revenue. See instructions		1,905,309.	313,538.	0.	46,966.
009 12-				_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Form <b>990</b> (202

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2022.04010 PHILANTHROPY OHIO

9

4000001

	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
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,				
Ŭ	trustees, and key employees	281,106.	151,534.	79,274.	50,298.
6	Compensation not included above to disqualified	201/1001	101/0010	157272	3072300
U	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	758,446.	408,850.	213,888.	135,708.
8	Pension plan accruals and contributions (include	750,440.	400,000	213,0001	133,700.
0	section 401(k) and 403(b) employer contributions)	11 131	22,334.	11,684.	7 /13
0		41,431. 129,774.	69,956.	36,598.	7,413. 23,220.
9	Other employee benefits	77,199.	41,615.	21,771.	13,813.
10	Payroll taxes	11,199.	41,013.	<u> </u>	15,015.
11	Fees for services (nonemployees):				
a	Management	3,605.		3,605.	
b	Legal	16,923.		16,923.	
c	Accounting	56,243.	56,243.	10,923.	
d	Lobbying	50,243.	50,243.		
е	Professional fundraising services. See Part IV, line 17	7 100		7 100	
f	Investment management fees	7,102.		7,102.	
g	Other. (If line 11g amount exceeds 10% of line 25,		10 000	22.065	
	column (A), amount, list line 11g expenses on Sch O.)	50,474.	16,927.	33,265.	282.
12	Advertising and promotion		A A A E	2 7 2 2	
13	Office expenses	8,449.	3,935.	3,722.	792.
14	Information technology	114,557.	51,365.	52,862.	10,330.
15	Royalties		<u> </u>		10.005
16	Occupancy	106,959.	63,819.	30,305.	12,835.
17	Travel	18,456.	11,012.	5,229.	2,215.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials $\dots$				
19	Conferences, conventions, and meetings	167,970.	167,970.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	34,656.	20,678.	9,819.	4,159.
23	Insurance				
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 0.)				
a	SUBSCRIPTIONS AND MEMBE	29,870.	29,043.	827.	
b	PROFESSIONAL DEVELOPMEN	29,723.	16,023.	8,382.	5,318.
с					
d					
е	All other expenses	21,047.	9,311.	9,864.	1,872.
		1 052 000		E4E 100	

1,953,990.

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

(A) Total expenses

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

Form 990 (2022)

1

Do not include amounts reported on lines 6b,

Grants and other assistance to domestic organizations

7b, 8b, 9b, and 10b of Part VIII.

(B) Program service expenses

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**(D)** Fundraising expenses

1,872. 268,255.

Form 990 (2022)

(C) Management and general expenses

232010 12-13-22

Check here

25

26

Total functional expenses. Add lines 1 through 24e

reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Joint costs. Complete this line only if the organization

if following SOP 98-2 (ASC 958-720)

1,140,615.

545,120.

Form 990 (2022)

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### PHILANTHROPY OHIO Part X Balance Sheet

		Check if Schedule O contains a response or note	e to any line ir	n this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			262,628.	1	281,195.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net		ſ	123,022.	3	184,000.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes		, ,		5	
	6	Loans and other receivables from other disqualif		1			
		under section 4958(f)(1)), and persons described				6	
s	7	Notes and loans receivable, net		ſ		7	
Assets	8	Inventories for sale or use				8	
As	9				15,760.	9	2,880.
		Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	337,043.			
	b	Less: accumulated depreciation		337,043. 140,363.	151,711.	10c	196,680.
	11	Investments - publicly traded securities			1,342,008.	11	879,416.
	12	Investments - other securities. See Part IV, line 1				12	0,0,1200
	13	Investments - program-related. See Part IV, line 1				13	
	14					14	
	15	Intangible assets           Other assets. See Part IV, line 11			0.	15	181,727.
	16	Total assets. Add lines 1 through 15 (must equa			1,895,129.	16	1,725,898.
	17	Accounts payable and accrued expenses			195,072.	17	201,423.
	18	Grants payable and aborded expenses				18	
	19	Deferred revenue			180,795.	19	33,805.
	20	Tax-exempt bond liabilities			2007/200	20	
	21	Escrow or custodial account liability. Complete F				21	
	22	Loans and other payables to any current or form				21	
Liabilities	22	trustee, key employee, creator or founder, subst					
bili		controlled entity or family member of any of thes				22	
Lia	23	Secured mortgages and notes payable to unrela				22	
	23 24	Unsecured notes and loans payable to unrelated				23	
	2 <del>.</del> 25	Other liabilities (including federal income tax, pay		ed third		27	
	25	parties, and other liabilities not included on lines					
		of Schedule D	17-24). Oomp		0.	25	246,865.
	26	Tabal Rah White Ashi Kasa 47 Universite OF			375,867.		482,093.
	20	Organizations that follow FASB ASC 958, che	ck bere	X	57570070	20	10270551
ŝ		and complete lines 27, 28, 32, and 33.	CK HEIE				
nce	27				1,342,873.	27	887 594.
ala	28				176,389.	28	887,594. 356,211.
ЧB	20	Organizations that do not follow FASB ASC 9	58 chock hor		170,505.	20	550,211.
-un		and complete lines 29 through 33.		e 🗆			
or	00					20	
Net Assets or Fund Balances	29 20	Capital stock or trust principal, or current funds				29	
SS	30 21	Paid-in or capital surplus, or land, building, or eq				30	
∋t A	31	Retained earnings, endowment, accumulated inc			1,519,262.	31	1,243,805.
ž	32				1,895,129.	32	
	33	Total liabilities and net assets/fund balances			1,090,129.	33	1,725,898.

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<u>, , , , , , , , , , , , , , , , , , , </u>	1990 (2022) PHILANTHROPY OHIO	31-11	L11842	Pa	ge 1
	rt 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	1,90	5,3	09
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,95		
3	Revenue less expenses. Subtract line 2 from line 1	3	- 4	8,6	81
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,51	9,2	62
5	Net unrealized gains (losses) on investments	5	-22	6,7	76
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			0
0	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,24	<u>3,8</u>	05
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
			_	Yes	N
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule C				
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 o	n a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		<b>2</b> b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate b	oasis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the a				
	review, or compilation of its financial statements and selection of an independent accountant?		<u>2c</u>	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sched	lule 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?		<u>3a</u>		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	d audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

(Form 990)

## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047	
2022	

Open to Public	
Inspection	

						Open to Public Inspection	
	Go to www.irs.gov/	Form990 for instruction	ns and the	latest inf	ormation.	<b>F</b> armelessee	
Name of the organization		UTO					identification number 1-1111842
Part I Reason for	PHILANTHROPY O Public Charity Status.		omplete th	nis nart ) S	ee instruction		1-1111044
	ate foundation because it is: (						
	tion of churches, or association				VAVi)		
	ed in section 170(b)(1)(A)(ii).			1110(5)(1	<u>//~//י/·</u>		
	operative hospital service orga			(b)(1)(A)(ii	i).		
	h organization operated in co					)(iii). Enter	the hospital's name,
city, and state:	•						
5 An organization o	perated for the benefit of a co	llege or university owned	l or operat	ed by a go	vernmental u	nit describe	ed in
section 170(b)(1)	)(A)(iv). (Complete Part II.)						
6 🔄 A federal, state, o	r local government or governm	nental unit described in	section 17	70(b)(1)(A)	(v).		
7 X An organization th	nat normally receives a substa	ntial part of its support fi	om a gove	ernmental	unit or from th	e general p	oublic described in
section 170(b)(1)	(A)(vi). (Complete Part II.)						
8 A community trus	t described in section 170(b)	(1)(A)(vi). (Complete Par	t II.)				
	search organization described						
	non-land-grant college of agric	ulture (see instructions).	Enter the	name, city	, and state of	the college	or
-	nat normally receives (1) more					-	•
	o its exempt functions, subjec						
	ated business taxable income	(less section 511 tax) fro	m busines	ses acquii	red by the org	anization a	inter June 30, 1975.
	<b>a)(2).</b> (Complete Part III.) rganized and operated exclus	ively to test for public so	foty Soo	section 50	0(2)(4)		
- ·	rganized and operated exclus					rry out the	nurnoses of one or
Ŭ	ported organizations describe						
	12d that describes the type of						
	orting organization operated, s						giving
	organization(s) the power to re						
organization. Yo	ou must complete Part IV, Se	ections A and B.					
b 🗌 Type II. A supp	orting organization supervised	or controlled in connect	ion with it	s supporte	d organizatio	n(s), by hav	ing
control or mana	gement of the supporting org	anization vested in the sa	ame perso	ns that co	ntrol or manag	ge the supp	ported
organization(s).	You must complete Part IV,	Sections A and C.					
	nally integrated. A supportin					ly integrate	d with,
	ganization(s) (see instructions						
	nctionally integrated. A supp						
	ionally integrated. The organiz		•			an attentiv	veness
	e instructions). <b>You must co</b> r	•					
	if the organization received a				турет, туре	ii, Type iii	
f Enter the number of su	grated, or Type III non-functio						
	formation about the supported	ed organization(s)					<u> </u>
(i) Name of supported		(iii) Type of organization	(iv) Is the orga	anization listed ng document?	(v) Amount of	monetary	(vi) Amount of other
organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	structions)	support (see instructions)
Total							1

#### Schedule A (Form 990) 2022

PHILANTHROPY OHIO

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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.)

Sec	ction A. Public Support						4
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						7
	include any "unusual grants.")	1933718.	1184169.	1629107.	1847123.	1544805.	8138922.
2	Tax revenues levied for the organ- ization'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	1933718.	1184169.	1629107.	1847123.	1544805.	8138922.
	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)						1592220.
	Public support. Subtract line 5 from line 4.						6546702.
Sec	ction B. Total Support	-					
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	<b>(f)</b> Total
7	Amounts from line 4	1933718.	1184169.	1629107.	1847123.	1544805.	8138922.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources $\dots$	35,334.	30,355.	30,370.	83,453.	42,103.	221,615.
9	Net income from unrelated business		$\sim$	r			
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital	2,887.	1 222	16,177.	6,013.	4,863.	21 162
	assets (Explain in Part VI.)	2,007.	1,223.	10,1//.	0,013.	4,003.	<u>31,163.</u> 8391700.
	Total support. Add lines 7 through 10					12 1	,270,809.
	Gross receipts from related activities, First 5 years. If the Form 990 is for the		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				,210,009.
13	•						
Sec	organization, check this box and stor ction C. Computation of Publi					<u></u>	·····
	Public support percentage for 2022 (I			column (f))		14	78.01 %
	Public support percentage from 2021		•	.,,		15	78.58 %
	Ica 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 X						
b	33 1/3% support test - 2021. If the		•				
	and <b>stop here.</b> The organization gual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact						
	meets the facts-and-circumstances te			-	-		
b	10% -facts-and-circumstances test	-		• • • •			······
	more, and if the organization meets th						
	organization meets the facts-and-circi						
18	Private foundation. If the organization		•		••••		
	<u> </u>		,				(Form 990) 2022

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Schedule A	Form 990	) 2022

### PHILANTHROPY OHIO

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.)

16       Public support percentage from 2021 Schedule A, Part III, line 15       16       %         Section D. Computation of Investment Income Percentage       17       17       %         17       Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))       17       18       %         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       1         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       1         20       Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions       1	Section A. Pub	lic Support							4
membranity fields are viewed. (Do not include any viewed prints size.       Image: State of the service of the servi	Calendar year (or fisc	al year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(	e) 2022	(f) Total
include any "unusual grants") Grass needpite from admission, merchandles odd or services per- formed, or facilities trunkled in any activity that is related to the organization's take-empt purpose 3 Gross receipts from activities that are not an unvested trade or bue- iness under section 513 4 Tax revenues levide for the organ- ization's benefit and ether paid to or expended on its behalf 5 The value of services or facilities furnished by agreemmental unit to the organization's benefit and ether paid to or expended on its behalf 5 The value of services or facilities 6 Total. Add lines 1 through 5 a Amounts included on lines 1.2, and 3 received from disqualified persons b Amaute indexed on line 3.2, and 3 received from disqualified persons b Amaute indexed on line 3.2, and 3 received from disqualified persons b Amaute indexed on line 3.2, and 3 received from the grant services construction without charge 6 Add lines 7 and 76 8 Public apport, diametrix, butin 8.1 8 Public apport bases, activity, and the second public 8 Public apport percentage for 20.2 8 Public apport percentage for 20.2 8 Public apport percentage for 20.2 9 Public apport percentage for 20.2 9 Public apport percentage for 20.2 9 Public apport best, activite and the cond and but the kt a	1 Gifts, grants, c	ontributions, and							
2 Gross receipts from admissions, marchandlas and of assives performed, or facilities functioned in the related to the organization's tax exempt purpose 3 Gross receipts from admissions and tax exempt purpose 3 Gross receipts from admissions and tax exempt purpose 3 Gross receipts from admissions and tax exempt purpose 3 Gross receipts from admissions and tax exempt purpose 3 Gross receipts from admissions and tax exempt purpose 3 Gross receipts from admissions and tax exempt purpose 3 Gross receipts from admissions and tax exempt purpose 3 Gross receipts from admissions and tax exempt purpose 3 Gross receipts from admissions and tax exempt purpose 3 Gross receipts from admissions and from the from admission admissions and tax exempt part of admits that the form admission admissions and from the form admission	membership fe	es received. (Do not							
mechandise sold or services per- formed, or facilities furnished organization's tax-exempt purpose       image: services per- formed, or facilities furnished are not an invested trade or bue- iness under section 513         3 Gross receipts from activities that are not an invested trade or bue- iness under section 513       image: section 513         5 The value of services or facilities furnished by a governmental unit to the organization's benefit and either paid to or expended on this behalf       image: section 513         6 Total. Add lines 1 through 5.       image: section 514       image: section 514         7 Anonus fixedod on lines 1.2, and 3 received from disqualified persons b Anounts included on line 1.2, and 3 received from disqualified persons b Anounts included on line 3.2, and 3 received from disqualified persons b b anounts include on line 3.2, and 3 received from disqualified persons b b anounts include on line 3.2, and 3 received from disqualified persons b b anounts include on line 3.2, and 3 received from disqualified persons b b anounts for line 5.         9 Audition through 30.1, and 70       (e) 2016       (e) 2020       (e) 2021       (e) 2022       (f) Total 9         9 Anounts form line 6.       image: second file and 70       image: second file and 70       image: second file and 70         10 of this upport. Gause in the painting in 9. Anounts form lines 4.       image: second file and 70       image: second file and 70         10 of this upport. Gause in the painting in 9. Anounts form lines 4.       image: second file and 70       image: second file and 70         10 of	include any "ur	nusual grants.")							
3 Gross receipts from activities that are not an unrelated trade or bus iness under section 513       4         4 Tax revenues level of the organization ization's benefit and either paid to or expanded on its behalf       5         5 The value of standing section 513       5         6 Total. Add ines 1 through 5       5         7 A mounts included on lines 1, 2, and 3 received from disqualified persons       5         A mounts included on lines 1, 2, and 3 received from disqualified persons       5         A mounts included on lines 1, 2, and 3 received from disqualified persons       5         A mounts included on lines 1, 2, and 3 received from disqualified persons       5         A mounts included on lines 1, 2, and 3 received from disqualified persons       5         A mounts included on lines 1, 2, and 3 received from disqualified persons       5         A mounts from lines 6       6         A mounts from lines 6       6         A mounts from lines 6       6         A diverset, restricted on securities loans, rents, royalland, and rob       6         A diverset, restricted and restricted and restricted and restricted and robrems is rule and rob       6         1 Net income from unrelated automos whether on the business is an regulary carried on. The sale of capital asset (F-pain IP art V), restrict 1 and rob person       1         3 Total support percentage from 2022 (line 10c, column (t), divided by line 13, column (t))	merchandise s formed, or faci any activity tha	old or services per- lities furnished in at is related to the							X
are not an unrelated trade or bus- iness under section 513 4 Tax revenues levied for the organ- ization is benefit and ether 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 7 A mounts included on lines 1, 2, and 3 received from disqualified persons 9 Amouts included on line 2, 2, and 4 Tax revenues levied for the sease state 1 amout is the state is through 5 7 Break and 7D	•								
4 Tax revenues levied for the organization is benefit and either paid to or expended on its behalf       Image: Construction of the behalf of the organization without charge         5 The value of services or facilities furnished by a governmental unit to the organization without charge       Image: Construction of the behalf of the organization without charge         6 Total. Add lines 1 through 5       The value of services or facilities for through 5       Image: Construction of the organization without charge         6 Total. Add lines 1 through 5       The value of services or facilities for through 5       Image: Construction of the organization without charge         6 Total. Add lines 1 through 5       Image: Construction of the the service of the value of services or facilities for the value of services or facilitities or facilities for the value of services or facil	are not an unre	elated trade or bus-					(		
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10a

Yes

No

### 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.)

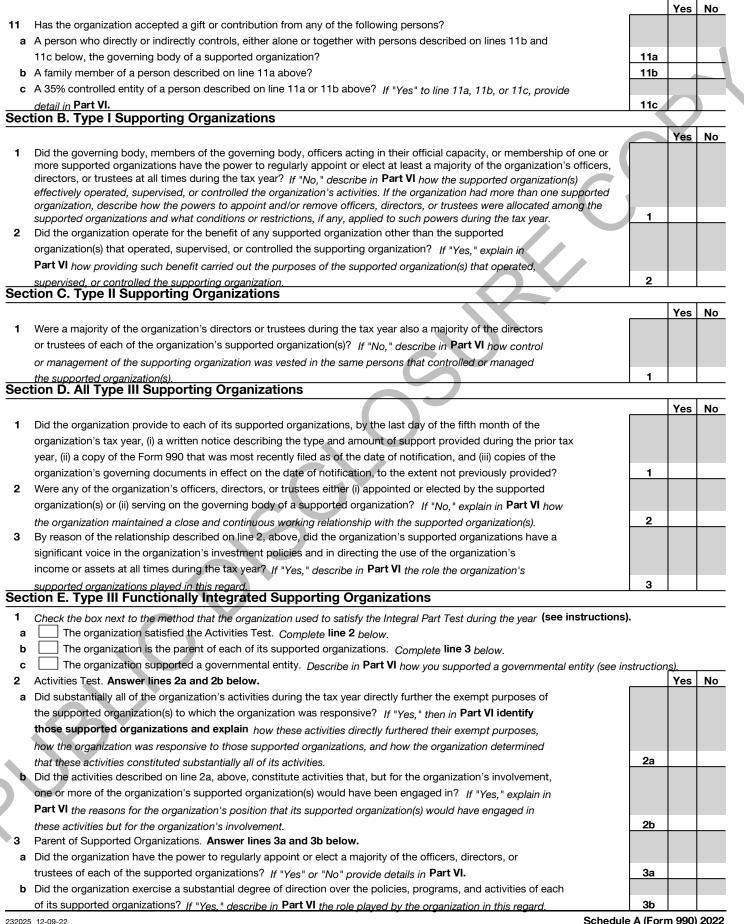
### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **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)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *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.*
- **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)? *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.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? 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).
- **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? *If "Yes," provide detail in* **Part VI.**
- 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? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **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))? *If* "*Yes*," *provide detail in* **Part VI.**
- **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? *If* "Yes," *provide detail in* **Part VI.**
- 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? If "Yes," provide detail in **Part VI.**
- **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)? *If* "Yes," *answer line 10b below.* 
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

232024 12-09-22

10b | Schedule A (Form 990) 2022

	(Form 990) 2022	PHILANTHROPY
Part IV	Supporting Or	ganizations (continued)



OHIO

Schedule A (Form 990) 2022

2022.04010 PHILANTHROPY OHIO

17

chedule A (Form 990) 2022 PHILANTHROPY OHIO			1-1111842 Page
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting (	Orga	nizations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying the	rust on	Nov. 20, 1970 ( explain in I	Part VI). See instructions
All other Type III non-functionally integrated supporting organizations must co	mplete	e Sections A through E.	
action A Adjusted Nat Income			(B) Current Year
ection A - Adjusted Net Income		(A) Prior 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		
Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
ection B - Minimum Asset Amount		(A) Prior Year	(B) Current Year
		(4) 1 1101 1 Cal	(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	<u>1c</u>		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors			
(explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 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		
ection C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
<ul> <li>Check here if the current year is the organization's first as a non-functionally in</li> </ul>			nization (soo

Schedule A (Form 990) 2022

232026 12-09-22

instructions)

)		
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	dule A (Form 990) 2022 PHILANTHROPY				1–1111842 Page 7
Par	t V Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	nizations (continu	ued)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer			1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions ( <i>describe in</i> <b>Part VI</b> ). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	e organization is responsive			, i i i i i i i i i i i i i i i i i i i
_	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount	(1)	(11)	10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	าร	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
а	From 2017				
b	From 2018				
С	From 2019				
d	From 2020				
е	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: \$				
а	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
	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, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
-	and 4c.				
8	Breakdown of line 7:				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
е	Excess from 2022			-	
				So	hedule A (Form 990) 2022

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Bit Network         PHILANTHROPY OHIO           Part VI         Supplemental Information. Provide the explanations required by Part II, lin           Part IV.         Supplemental Information. Provide the explanations required by Part II, lin           Part IV.         Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; P           Iine 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and           Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete (See instructions.)	31–1111842 Page & ne 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section B, lines 1 and 2; Part IV, Section C, 3b; Part V, line 1; Part V, Section B, line 1e; Part V, this part for any additional information.
(See instructions.)	
	0
	O

232028 12-09-22

## Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

\*\* PUBLIC DISCLOSURE COPY \*\*

## 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

Employer identification number

2022

name er me ergamzader	•	
:	PHILANTHROPY OHIO	31-1111842
Organization type (chec	k one):	
Filers of:	Section:	
Form 990 or 990-EZ	$\fbox$ 501(c)( 3 ) (enter number) organization	$\mathbf{O}$
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	$\sim$
	527 political organization	$\mathbf{O}$
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

X 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 for an *exclusively* set.

**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).

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

Schedule B (Form 990) (2022)

ime of o	rganization		Employer identification number
HILAI	NTHROPY OHIO		31-1111842
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 contribution	(d) ns Type of contribution
		\$133,5	Person       X         Payroll       Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
2		\$33,9	25.     Person     X       Payroll     Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
3		\$32,1	Person       X         Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) Type of contribution
4		\$60,0	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) Type of contribution
5		\$46,1	Person       X         Payroll       Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) ns Type of contribution
6		\$258,2	Person       X         Payroll

22

Schedule B (Form 990) (2022)

Page **2** 

	3 (Form 990) (2022) ganization		Page 2 Employer identification number
HILAN	THROPY OHIO		31-1111842
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 contributio	(d) ns Type of contribution
7		\$136,3	04. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
8		\$63,5	97. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
(a)	(b)	\$ (c)	Person Payroll October (Complete Part II for noncash contributions.)
No.	Name, address, and ZIP + 4	Total contribution     \$	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
		\$	Person Payroll Payroll (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)

lame of or	3 (Form 990) (2022) ganization		Page Employer identification number
HILAN	THROPY OHIO		31-1111842
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	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
_			
		\$	Schedule B (Form 990) (202:

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lame of organization			Employer identification number
PHILANTHROPY OHIO			31-1111842
Part III Exclusively religious, charitable, etc., contrib from any one contributor. Complete columns completing Part III, enter the total of exclusively religiou Use duplicate copies of Part III if additior	s (a) through (e) and the followin us, charitable, etc., contributions of \$	ng line entry. Fo	<b>501(c)(7), (8), or (10) that total more than \$1,000 for the year</b> or organizations for the year. (Enter this info. once.) \$
(a) No. from (b) Purpose of gift Part I	(c) Use of g	gift	(d) Description of how gift is held
	_		
	(e) Transf	fer of gift	
Transferee's name, address	s, and ZIP + 4		Relationship of transferor to transferee
a) No. from (b) Purpose of gift Part I	(c) Use of g	gift	(d) Description of how gift is held
· · · · · · · · · · · · · · · · · · ·			
	(e) Transf	fer of gift	
<b>T</b>			
Transferee's name, address	s, and ZIP + 4		Relationship of transferor to transferee
a) No. from (b) Purpose of gift Part I	(c) Use of g	gift	(d) Description of how gift is held
	(e) Transf	fer of gift	
Transferee's name, address	s, and ZIP + 4		Relationship of transferor to transferee
a) No. from Part I (b) Purpose of gift	(c) Use of g	gift	(d) Description of how gift is held
	-		
	(e) Transf	fer of gift	
Transferee's name, address	s, and ZIP + 4		Relationship of transferor to transferee
3454 11-15-22	25	1	Schedule B (Form 990) (2022)

25 2022.04010 PHILANTHROPY OHIO

SCHEDULE C	Po	olitical Campaign	and Lobbyir	ng Activities	OMB No. 1545-0047
(Form 990)			-	-	2022
	-	janizations Exempt From Incor			2022
Department of the Treasury	-	if the organization is describe			Open to Public
Internal Revenue Service		o to www.irs.gov/Form990 for			Inspection
-	-	n Form 990, Part IV, line 3, or F		ine 46 (Political Campaign A	ctivities), then
		nplete Parts I-A and B. Do not co	•	· Do not complete Dort I D	
<ul> <li>Section 501(c) (other</li> <li>Section 527 organization</li> </ul>		01(c)(3)) organizations: Complete	e Parts I-A and C below	/. Do not complete Part I-B.	
0		n Form 990, Part IV, line 4, or F	orm 990 E7 Dart VI	ling 47 (Lobbying Activitios)	then
-		have filed Form 5768 (election u		,	
()()		have NOT filed Form 5768 (elect	( )/		
		n Form 990, Part IV, line 5 (Pro			
Tax) (See separate inst	-			,	
<ul> <li>Section 501(c)(4), (5)</li> </ul>	, or (6) organizat	tions: Complete Part III.			
Name of organization				Empl	oyer identification numbe
		HROPY OHIO			31-1111842
Part I-A Comple	ete if the org	panization is exempt und	ler section 501(c)	or is a section 527 org	ganization.
1 Provide a description	on of the organiz	zation's direct and indirect polition	cal campaign activities	in Part IV.	
2 Political campaign a	activity expendit	ures		\$	
3 Volunteer hours for	political campai	ign activities			
				(0)	
-	-	panization is exempt und			
		incurred by the organization une			
		incurred by organization manag			
		on 4955 tax, did it file Form 4720			
					Yes N
b If "Yes," describe in Part I-C Comple		anization is exempt und	ler section 501(c)	except section 501(c)	(3)
-		d by the filing organization for se			(0).
		nization's funds contributed to of			
exempt function ac				\$	
•		s. Add lines 1 and 2. Enter here a			
					Yes N
5 Enter the names, ac	dresses and en	nployer identification number (El			the filing organization
made payments. Fo	or each organiza	tion listed, enter the amount pai	id from the filing organi	ization's funds. Also enter the	amount of political
		omptly and directly delivered to			e segregated fund or a
political action com	mittee (PAC). If	additional space is needed, pro-	vide information in Par	t IV.	1
<b>(a)</b> Name		(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds. If none, enter -0	contributions received an promptly and directly
					delivered to a separate
					political organization.
					If none, enter -0
$\otimes$					
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For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. LHA

Schedule C (Form 990) 202

232041 11-08-22

expenses, and sha	ation belongs to an affili are of excess lobbying e ation checked box A an	xpenditures).		group member's name	e, address, EIN,
Lim	its on Lobbying Expen iditures" means amour	ditures		<b>(a)</b> Filing organization's totals	(b) Affiliated grout totals
1a Total lobbying expenditures to inf	luence public opinion (g	rassroots lobbying)		0.	
<b>b</b> Total lobbying expenditures to inf	luence a legislative body	y (direct lobbying)		56,243.	
c Total lobbying expenditures (add				56,243.	
d Other exempt purpose expenditur				1,897,747.	
e Total exempt purpose expenditure				1,953,990. 247,700.	
f Lobbying nontaxable amount. Ent If the amount on line 1e, column (a)		bying nontaxable amo		247,700.	
Not over \$500,000		he amount on line 1e.			
Over \$500,000 but not over \$1,00		0 plus 15% of the exce	ss over \$500 000		
Over \$1,000,000 but not over \$1,5		0 plus 10% of the exce			
Over \$1,500,000 but not over \$17		0 plus 5% of the excess			
Over \$17,000,000	\$1,000,0				
g Grassroots nontaxable amount (er	nter 25% of line 1f)			61,925.	
h Subtract line 1g from line 1a. If ze	ro or less, enter -0			0.	
i Subtract line 1f from line 1c. If zer				0.	
j If there is an amount other than ze		ne 1i, did the organizat	ion file Form 4720	Г	<b>—</b> —
reporting section 4911 tax for this		raging Period Under S			Yes
(Some organizations t	· · · · ·	1(h) election do not h te instructions for line ditures During 4-Year	es 2a through 2f.)	of the five columns be	low.
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	<b>(c)</b> 2021	( <b>d</b> ) 2022	<b>(e)</b> Total
	244 700	105 (10	220 450		
2a Lobbying nontaxable amount	244,789.	195,612.	230,450.	247,700.	918,55
<b>b</b> Lobbying ceiling amount	244,789.	195,612.	230,450.	247,700.	
	244,789.	195,612.	230,450.	247,700.	
<b>b</b> Lobbying ceiling amount	244,789. 64,409.	195,612. 66,074.	230,450.	247,700.	1,377,82
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					918,553 1,377,82 255,58 61,92
<ul> <li>b Lobbying ceiling amount (150% of line 2a, column(e))</li> <li>c Total lobbying expenditures</li> <li>d Grassroots nontaxable amount</li> <li>e Grassroots ceiling amount</li> </ul>				56,243.	1,377,82 255,58 61,92
<ul> <li>b Lobbying ceiling amount (150% of line 2a, column(e))</li> <li>c Total lobbying expenditures</li> <li>d Grassroots nontaxable amount</li> </ul>				56,243.	1,377,82
<ul> <li>b Lobbying ceiling amount (150% of line 2a, column(e))</li> <li>c Total lobbying expenditures</li> <li>d Grassroots nontaxable amount</li> <li>e Grassroots ceiling amount</li> </ul>	64,409.			56,243. 61,925.	1,377,82 255,58 61,92

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# 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)).

ithe lobbying activity.       Yes         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:       Image: State St	No	Amount
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 to 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 under section 4912         d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?         art III-A         Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).         1 Were substantially all (90% or more) dues received nondeductible by members?         2 Did the organization make only in-house lobbying and political campaign activity expenditures from the prior y answered "Yes."         1 Dues, assessments and similar amounts from members		
or referendum, through the use of:  Volunteers?  Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  Media advertisements?  Mailings to members, legislators, or the public?  Publications, or published or broadcast statements?  Grants to other organizations for lobbying purposes?  Direct contact with legislators, their staffs, government officials, or a legislative body?  Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  Other activities?  Total. Add lines 1c through 1i  Data Id di lines 1c through 1i  Total. Add lines 1c through 1i  Total. Add lines 1c through 1i  Complete if the organization is exempt under section 501(c)(3)?  If "Yes," enter the amount of any tax incurred by organization managers under section 4912  If "Yes," enter the amount of any tax incurred by organization managers under section 4912  If "Yes," enter the amount of any tax incurred by organization managers under section 4912  If "Yes," enter the amount of any tax incurred by organization managers under section 4912  If "Yes," enter the amount of any tax incurred by organization managers under section 501(c)(4), section 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization make only in-house lobbying and political campaign activity expenditures from the prior or answered "No" C answered "Yes"  Dues, assessments and similar amounts from members. Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Cotal		
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a Current year b Carryover from last year c Total		
b Carryover from last year c Total		
c Total	2	a
c Total	2	b
		c
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	3	
expenditures next year?	3	1
5 Taxable amount of lobbying and political expenditures. See instructions	4	5
Part IV Supplemental Information	4	

Schedule C (Form 990) 2022

232043 11-08-22

<b>(Forn</b>	HEDULE D n 990) ment of the Treasury I Revenue Service	Complete if the orga Part IV, line 6, 7, 8, 9, 10 A	al Financial Statements Inization answered "Yes" on Form 990, 9, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. 10 for instructions and the latest information.	OMB No. 1545-0047	
Nam	e of the organization			Employer identification number	
Par	rt I Organiza	PHILANTHROPY OHIO	d Funds or Other Similar Funds or Ac	<u>31-1111842</u>	
Par		n answered "Yes" on Form 990, Part IV, lin		Counts. Complete if the	
	organization			b) Funds and other accounts	
	<b>-</b>				
1		nd of year			
2		f contributions to (during year)			
3		f grants from (during year)			
4		t end of year			
5	-		writing that the assets held in donor advised fund		
			exclusive legal control?		
6	•	<b>c</b>	dvisors in writing that grant funds can be used or		
			or donor advisor, or for any other purpose conferri		
De	impermissible priva				
Par			ganization answered "Yes" on Form 990, Part IV,	line 7.	
1		servation easements held by the organization	· · · · · · · · · · · · · · · · · · ·		
		of land for public use (for example, recrea		rically important land area	
		f natural habitat	Preservation of a certif	fied historic structure	
		of open space			
2			fied conservation contribution in the form of a cor		
	day of the tax year			Held at the End of the Tax Year	
а	Total number of co	onservation easements		2a	
b	Total acreage restr	ricted by conservation easements		2b	
С	Number of conserv	vation easements on a certified historic str	ucture included in (a)	2c	
d	Number of conserv	vation easements included in (c) acquired a	after July 25,2006, and not on a		
	historic structure li	sted in the National Register		2d	
3	Number of conserv	vation easements modified, transferred, rel	leased, extinguished, or terminated by the organiz	zation during the tax	
	year				
4	Number of states v	where property subject to conservation eas	sement is located		
5	Does the organizat	tion have a written policy regarding the per	riodic monitoring, inspection, handling of		
	violations, and enfo	orcement of the conservation easements it	t holds?	Yes 🗌 No	
6	Staff and voluntee	r hours devoted to monitoring, inspecting,	handling of violations, and enforcing conservation	n easements during the year	
		_			
7	Amount of expens	es incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation eas	ements during the year	
8	Does each conserv	vation easement reported on line 2(d) abov	ve satisfy the requirements of section 170(h)(4)(B)(	i)	
	and section 170(h)	(4)(B)(ii)?		Yes No	
9	In Part XIII, describ	be how the organization reports conservati	on easements in its revenue and expense stateme	ent and	
	balance sheet, and	d include, if applicable, the text of the footr	note to the organization's financial statements that	t describes the	
	organization's acc	ounting for conservation easements.			
Par			f Art, Historical Treasures, or Other Si	imilar Assets.	
	Complete if	the organization answered "Yes" on Form	1 990, Part IV, line 8.		
1a	If the organization	elected, as permitted under FASB ASC 95	68, not to report in its revenue statement and bala	nce sheet works	
	of art, historical tre	easures, or other similar assets held for put	olic exhibition, education, or research in furtheran	ce of public	
	service, provide in	Part XIII the text of the footnote to its finan	ncial statements that describes these items.		
b	If the organization	elected, as permitted under FASB ASC 95	i8, to report in its revenue statement and balance	sheet works of	
	art, historical treas	ures, or other similar assets held for public	exhibition, education, or research in furtherance	of public service,	
	provide the followi	ng amounts relating to these items:			
	(i) Revenue inclue	ded on Form 990, Part VIII, line 1		\$	
	(ii) Assets include	ed in Form 990, Part X		\$	
2	If the organization	received or held works of art, historical tre	asures, or other similar assets for financial gain, p	provide	
the following amounts required to be reported under FASB ASC 958 relating to these items:					
а	Revenue included	on Form 990, Part VIII, line 1		\$	
	Assets included in			•	
LHA	For Paperwork Re	eduction Act Notice, see the Instruction	s for Form 990.	Schedule D (Form 990) 2022	

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29 2022.04010 PHILANTHROPY OHIO

_	edule D (Form 990) 2022 PHILANT	HROPY OHIO ollections of Art, I	Historical Tre	easures, or	Other Simila	31-111 r Assets			~9
3	Using the organization's acquisition, accessi							ueu)	
5	collection items (check all that apply):		neek any of the	ionowing that	make significant				
а	Public exhibition	d		change progra	m				
b	Scholarly research	e [			111				
	Preservation for future generations	e							
C ⊿	Ū	llootions and ovalain he	wy thay further th	ha organizatio	n'a avampt purpa	oo in Dort V			
4	Provide a description of the organization's co		-	-					
5	During the year, did the organization solicit o			•			V		7.
Dai	to be sold to raise funds rather than to be ma rt IV Escrow and Custodial Arran						Yes		
r ai	reported an amount on Form 990, Pa		if the organizatio	on answered "	res" on Form 990	U, Part IV, IIr	1e 9, or		
4.0	•		for contribution	a ar athar and	ata pat ipoludad			Ť	
1a	Is the organization an agent, trustee, custodi						Vaa		٦.
<b>L</b>	on Form 990, Part X?						Yes		
b	If "Yes," explain the arrangement in Part XIII	and complete the follow	ing table.				Amount		
-	Designing holeses						Amount		
	Beginning balance								
	Additions during the year								
e	<b>J J J</b>					r			
T	Ending balance						Vee		
	Did the organization include an amount on F						Yes		ן ן ר
_	If "Yes," explain the arrangement in Part XIII. rt V Endowment Funds. Complete i					<u></u>			
r ai	rt V Endowment Funds. Complete i		(b) Prior year	(c) Two year		years back	(e) Four	Vooro	ha
		(a) Current year	(b) Phor year	(C) Two year	S DACK (U) THEE	years Dack	(e) Four	years	IJd
	Beginning of year balance								
	Contributions								
	Net investment earnings, gains, and losses								
	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses			-					
g	End of year balance								
2	Provide the estimated percentage of the curr		ne 1g, column (a	ı)) held as:					
а	Board designated or quasi-endowment	%	6						
b		%							
С									
	The percentages on lines 2a, 2b, and 2c sho								
3a	Are there endowment funds not in the posse	ssion of the organization	n that are held a	nd administer	ed for the		г		-
	organization by:							Yes	Ν
	(i) Unrelated organizations						3a(i)		
	(ii) Related organizations						3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization	tions listed as required	on Schedule R?				3b		
4	Describe in Part XIII the intended uses of the		ent funds.						
Pai	rt VI Land, Buildings, and Equipm								
	Complete if the organization answere	d "Yes" on Form 990, P	art IV, line 11a. S	See Form 990,	Part X, line 10.				
	Description of property	(a) Cost or othe		t or other	(c) Accumulat		( <b>d)</b> Booł	k valu	е
		basis (investmen	it) basis	(other)	depreciation	1			
1a	Land								
b	Buildings								
	Leasehold improvements			4,037.	80,4			3,5	
	Equipment			51,124.	46,1			1,9	
			1 7	1 000	13,7	21	150	3,1	55
e	Other		/	1,882.	, I	24.	<u></u>	<u>, , ,</u>	5

Dort VII Invootme	onto Othor Socurition	
Schedule D (Form 990) 2	2022 PHILANTHRO	DPY OHIO

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-c	of-year market value
) Financial derivatives			
2) Closely held equity interests			
) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" o	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-c	of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" o	n Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a) [	Description		(b) Book value
(1) OPERATING RIGHT-OF-USE-ASS	ET		181,727.
(2)			•
(3)			
(4)			
(5)			
(6)			
(7)			
	45)		101 707
otal. (Column (b) must equal Form 990, Part X, col. (B) line	15.)		181,727.
Part X Other Liabilities.		· · ·	181,727.
vial. (Column (b) must equal Form 990, Part X, col. (B) line         vart X       Other Liabilities.         Complete if the organization answered "Yes" or		· · ·	
vial. (Column (b) must equal Form 990, Part X, col. (B) line         Part X       Other Liabilities.         Complete if the organization answered "Yes" of a complete if the organization of liability		· · ·	181,727. (b) Book value
<b>Other Liabilities.</b> Complete if the organization answered "Yes" o         (1) Federal income taxes		· · ·	(b) Book value
Other Liabilities.         Complete if the organization answered "Yes" o         (a) Description of liability         (1) Federal income taxes         (2) OPERATING LEASE LIABILITY		· · ·	
tal. (Column (b) must equal Form 990, Part X, col. (B) line         vart X       Other Liabilities.         Complete if the organization answered "Yes" o         (a) Description of liability         (1) Federal income taxes         (2) OPERATING LEASE LIABILITY         (3)		· · ·	<b>(b)</b> Book value
vtal. (Column (b) must equal Form 990, Part X, col. (B) line         Part X       Other Liabilities.         Complete if the organization answered "Yes" of         (a) Description of liability         (1) Federal income taxes         (2) OPERATING LEASE LIABILITY         (3)         (4)		· · ·	(b) Book value
Art X       Other Liabilities.         Complete if the organization answered "Yes" or (a) Description of liability         (1) Federal income taxes         (2) OPERATING LEASE LIABILITY         (3)         (4)         (5)		· · ·	(b) Book value
Art X       Other Liabilities.         Complete if the organization answered "Yes" o         (a) Description of liability         (1) Federal income taxes         (2) OPERATING LEASE LIABILITY         (3)         (4)         (5)         (6)		· · ·	(b) Book value
Other       Liabilities.         Other       Liabilities.         Complete if the organization answered "Yes" o         (a)       Description of liability         (1)       Federal income taxes         (2)       OPERATING         (3)       (4)         (5)       (6)         (7)       (7)		· · ·	(b) Book value
vart X       Other Liabilities.         Complete if the organization answered "Yes" o         (a) Description of liability         (1) Federal income taxes         (2) OPERATING LEASE LIABILITY         (3)         (4)         (5)         (6)			(b) Book value
Art X       Other Liabilities.         Complete if the organization answered "Yes" organization of liability         (1)       Federal income taxes         (2)       OPERATING LEASE LIABILITY         (3)         (4)         (5)         (6)         (7)			<b>(b)</b> Book value

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2022

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Sche	dule D (Form 990) 2022 PHILANTHROPY OHIO	31-	1111842	Page 4		
Par	t XI Reconciliation of Revenue per Audited Financial Statem	ents With	Revenue per Re	eturn.		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	2a.				
1	Total revenue, gains, and other support per audited financial statements			1	1,671	<u>,431.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments		-226,776.	·		
b	Donated services and use of facilities	2b				
с	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d			2e		<u>,776.</u>
3	Subtract line 2e from line 1			3	1,898,	<u>,207.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	7,102.	<u> </u>		
b	Other (Describe in Part XIII.)	4b				
С	Add lines 4a and 4b			4c		<u>,102.</u>
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,905,	<u>,309.</u>		
Pa	rt XII Reconciliation of Expenses per Audited Financial Stater		h Expenses per	Retur	n.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12					
1	Total expenses and losses per audited financial statements			1	1,946	<u>,888.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		$\wedge$			
а	Donated services and use of facilities	2a		_		
b	Prior year adjustments	<b>2</b> b		_		
С	Other losses			_		
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	1,946	<u>,888.</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	<u>4a</u>	7,102.	<u>-</u>		
b	Other (Describe in Part XIII.)	4b				
С	Add lines 4a and 4b			4c		,102.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	1,953	,990.
Pa	rt 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.

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SCHEDULE J (Form 990)	Compensation Information	OMB No. 1545-00		
(10111 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	2022		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 23.	Open to Publ		
Department of the Treasury Attach to Form 990.				
Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Employer Employer				
Nume of the organ		31-1111842		
Part I Que	stions Regarding Compensation			
		Yes		
1a Check the ap	propriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	ion A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	ss or charter travel Housing allowance or residence for personal use	a		
	r companions Payments for business use of personal residenc			
	mnification and gross-up payments			
	onary spending account	Ð		
<b>b</b> If any of the b	poxes on line 1a are checked, did the organization follow a written policy regarding payment or			
•	nt or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
	ization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3 Indicate whic	h, if any, of the following the organization used to establish the compensation of the organization's			
	ve 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.			
·	Compensation committee Written employment contract			
·	dent compensation consultant			
E Form 99	0 of other organizations X Approval by the board or compensation commit	tee		
4 During the ye	ar, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	or a related organization:			
e e	verance payment or change-of-control payment?	4a		
	and the second	46		
	or receive payment from a supplemental nonqualitied retirement plan?	40 40		
		40		
If "Yes" to an	y of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
Only costion	501(a)(2) $501(a)(4)$ and $501(a)(20)$ argonizations must complete lines 5.0			
	501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
	isted on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
0	n the revenues of:			
a ine organiza	ion?	<u>5a</u>		
<b>b</b> Any related c	rganization?	<u>5</u> b		
	e 5a or 5b, describe in Part III.			
	sted on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
-	n the net earnings of:			
a The organiza	ion?	<u>6a</u>		
<b>b</b> Any related c	rganization?	6b		
	e 6a or 6b, describe in Part III.			
	isted on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
not described	l on lines 5 and 6? If "Yes," describe in Part III	7		
8 Were any am	ounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	t exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III			
initial contrac				
	e 8, did the organization also follow the rebuttable presumption procedure described in			

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Schedule J (Form 990) 2022

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#### 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.

		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) DEBORAH AUBERT THOMAS	(i)	143,150.	0.	0.	11,680.	0.	154,830.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii) (ii)							
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	(ii)							
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Schedule J (Form 990) 2022 PHILANTHROPY OHIO	31-1111842	Page 3
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 the information of the second	ete this part for any additional information	on.
PART I, LINE 3:		
COMPENSATION FOR THE ORGANIZATION'S CEO IS ESTABLISHED BY THE EXECUTIVE		
COMMITTEE USING COMPENSATION SURVEY DATA AND IS SUBJECT TO APPROVAL BY THE		
ORGANIZATION'S BOARD. COMPENSATION SURVEY DATA IS ALSO USED TO ESTABLISH		
THE COMPENSATION FOR THE ORGANIZATION'S OFFICERS.		
	Schedule J (Fo	orm 990) 2022
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PHILANTHROPY OHIO

SCHEDULE O (Form 990)

Department of the Treasury

Name of the organization

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.



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PHILANTHROPY OHIO

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

THROUGH OUR MEMBER-DRIVEN PUBLIC POLICY COMMITTEE.

FORM 990, PART VI, SECTION A, LINE 6:

PHILANTHROPY OHIO IS AN ASSOCIATION OF FOUNDATIONS, CORPORATE GIVING

PROGRAMS, INDIVIDUALS, UNITED WAYS AND OTHER ORGANIZATIONS ACTIVELY

INVOLVED IN PHILANTHROPY IN OHIO.

FORM 990, PART VI, SECTION A, LINE 7A:

MEMBERS MEET ANNUALLY TO ELECT MEMBERS OF THE ORGANIZATION'S GOVERNING

BODY.

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

THE FORM 990 IS REVIEWED AND APPROVED BY THE AUDIT COMMITTEE WHICH PRESENTS

IT TO THE BOARD OF TRUSTEES FOR THEIR REVIEW. A FINAL FILING COPY OF THE

FORM IS PROVIDED TO EACH BOARD MEMBER VIA SECURE WEB PORTAL AND/OR E-MAIL

PRIOR TO ELECTRONIC SUBMISSION OF THE FORM TO THE IRS. THE FORM IS ALSO

DISPLAYED ON THE ORGANIZATION'S WEBSITE, WWW.PHILANTHROPYOHIO.ORG.

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

THE BOARD OF TRUSTEES OF PHILANTHROPY OHIO HAS ADOPTED A CONFLICT OF

INTEREST POLICY THAT APPLIES TO BOARD MEMBERS, STAFF, AND MEMBERS OF A

COMMITTEE WITH GOVERNING BOARD DELEGATED POWERS. ANNUALLY, THESE

INDIVIDUALS SUBMIT A SIGNED COPY OF THE POLICY FORM DISCLOSING ANY ACTUAL

OR POTENTIAL CONFLICTS OF INTEREST. FORMS ARE REVIEWED, AND IN THE EVENT OF

ANY CONFLICT, APPROPRIATE ACTION WOULD BE TAKEN CONSISTENT WITH THE

 LHA
 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990) 2022

 232211
 10-28-22
 Schedule O (Form 990) 2022

Schedule O (	Form 990	2022

Name of the organization

PHILANTHROPY OHIO

Page 2 Employer identification number 31-1111842

REQUIREMENTS OF THE POLICY.

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

COMPENSATION FOR THE ORGANIZATION'S CEO IS ESTABLISHED BY THE EXECUTIVE

COMMITTEE USING COMPENSATION SURVEY DATA AND IS SUBJECT TO APPROVAL BY THE

ORGANIZATION'S BOARD. COMPENSATION SURVEY DATA IS ALSO USED TO ESTABLISH

THE COMPENSATION FOR THE ORGANIZATION'S OFFICERS.

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

DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XII, LINE 2A:

THE ORGANIZATION'S FINANCIAL STATEMENTS WERE REVIEWED IN THE COURSE OF

PERFORMING THE ANNUAL AUDIT.

FORM 990, PART XII, LINE 2C:

PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

232212 10-28-22