

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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.

Open to Public Inspection

A For the 2021 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization CHARLOTTEVILLE AREA COMMUNITY FOUNDATION Doing business as		D Employer identification number 54-1506312
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite P.O. BOX 1767		E Telephone number (434) 296-1024
	City or town, state or province, country, and ZIP or foreign postal code CHARLOTTEVILLE, VA 22902		G Gross receipts \$ 112,531,245.
	F Name and address of principal officer: BRENNAN GOULD 114 4TH ST S.E., CHARLOTTEVILLE, VA 22902		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number ▶
	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		

J Website: WWW.CACFONLINE.ORG

K Form of organization: Corporation Trust Association Other ▶ **L** Year of formation: 1967 **M** State of legal domicile: VA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: GRANTS TO NON-PROFITS MAINLY IN CENTRAL VA & MANAGE CHARITABLE FUNDS FOR INDIVIDUALS & AGENCIES.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	11
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	11
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	14
	6 Total number of volunteers (estimate if necessary)	6	0
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	63,668.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	62,668.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 21,420,156.	Current Year 57,576,138.
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	6,497,562.	17,036,663.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,694,371.	2,997,239.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	31,612,089.	77,610,040.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	26,578,822.	32,422,725.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,375,438.	1,386,285.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 69,704.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,553,336.	2,440,608.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	29,507,596.	36,249,618.	
19 Revenue less expenses. Subtract line 18 from line 12	2,104,493.	41,360,422.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 284,044,465.	End of Year 339,690,669.
	21 Total liabilities (Part X, line 26)	37,696,596.	50,042,633.
	22 Net assets or fund balances. Subtract line 21 from line 20	246,347,869.	289,648,036.

Part II Signature Block

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

Sign Here	Signature of officer		Date
	BRENNAN GOULD, CEO Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	VIRGINIA R. BELCHER		
	Firm's name ▶ KEITER, STEPHENS, HURST, GARY & SHREAVES	Firm's EIN ▶ 54-1631262	Check if self-employed <input type="checkbox"/> PTIN P00421964
	Firm's address ▶ 4401 DOMINION BLVD GLEN ALLEN, VA 23060	Phone no. (804) 747-0000	

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

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FOUNDATION

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Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
CREATE EQUITABLE, SUSTAINABLE, LIFE-IMPROVING OPPORTUNITIES IN CHARLOTTESVILLE AND COUNTIES OF ALBEMARLE, BUCKINGHAM, FLUVANNA, GREENE, LOUISA, NELSON, AND ORANGE. WORK WITH DONORS TO FULFILL THEIR INTERESTS AND CONDUCT CHARITABLE GIVING.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses \$ 35,411,520. including grants of \$ 32,422,725.) (Revenue \$)
THROUGH OUR DISCRETIONARY GRANTS PROGRAM, WE CONTINUE TO BUILD OUR GRANTMAKING PRACTICE AND DOCUMENT OUR SUCCESS. IN 2021, OUR ENRICHING COMMUNITIES GRANTS SUPPORTED A WIDE RANGE OF LOCAL SERVICES AND ACTIVITIES, AWARDING \$819,815 TO 116 NONPROFITS. THIS ENRICHING COMMUNITIES GRANT TRACK IS SUPPORTED THROUGH ADDITIONAL FUNDING FROM DOROTHY BATTEN, THE COCO DAVIS FUND, AND THE TARRANT FUND. WE ALSO CONTINUED DISBURSEMENT TO OUR CURRENT MULTIYEAR GRANT PARTNERS, TOTALING \$546,035.59 TO 5 ORGANIZATIONS ADDRESSING A BROAD SPECTRUM OF COMMUNITY NEEDS IN EDUCATION, HEALTH, HOUSING, FOOD ACCESS, AND COMMUNITY-BUILDING.

THE FOUNDATION ALSO LAUNCHED THECOLLABORATION TO END HOMELESSNESS, A

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

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

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

4e Total program service expenses **35,411,520.**

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**CHARLOTTEVILLE AREA COMMUNITY
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Part IV Checklist of Required Schedules

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

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Part IV Checklist of Required Schedules (continued)

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

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	25
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c X	

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

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a		14
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	X	
d	If "Yes," indicate the number of Forms 8282 filed during the year		1
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state?		
	Note: See the instructions for additional information the organization must report on Schedule O.		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		
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?		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?		X
	If "Yes," complete Form 4720, Schedule O.		
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator 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.		

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

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

Section A. Governing Body and Management

			Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.	1a	11		
b Enter the number of voting members included on line 1a, above, who are independent	1b	11		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3			X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6 Did the organization have members or stockholders?	6			X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?	8a		X	
b Each committee with authority to act on behalf of the governing body?	8b		X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9			X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **▶VA**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **▶**
ORGANIZATION TREASURER - (434) 296-1024
114 4TH ST S.E., CHARLOTTESVILLE, VA 22902-1767

**CHARLOTTEVILLE AREA COMMUNITY
FOUNDATION**

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BRENNAN GOULD PRESIDENT, TREASURER & CEO	40.00	X		X				271,225.	0.	33,049.
(2) MURRAY RHODES DIRECTOR OF FINANCE	40.00					X		105,245.	0.	27,009.
(3) EBONI BUGG DIRECTOR OF PROGRAMS	40.00					X		118,041.	0.	11,976.
(4) KATIE KLING SENIOR DONOR RELATIONS MANAGER	40.00					X		100,463.	0.	11,058.
(5) MS. HEATHER L. CARLTON CHAIR	1.00	X		X				0.	0.	0.
(6) MR. GLENN RUST VICE-CHAIR	1.00	X		X				0.	0.	0.
(7) MR. LEONARD W. SANDRIDGE JR. SECRETARY	1.00	X		X				0.	0.	0.
(8) MR. ANTWON BRINSON DIRECTOR	1.00	X						0.	0.	0.
(9) MS. HELENE DOWNS DIRECTOR	1.00	X						0.	0.	0.
(10) MS. LIBBY EDWARDS-ALLBAUGH DIRECTOR	1.00	X						0.	0.	0.
(11) MRS. KRISTIN HENNINGSEN DIRECTOR	1.00	X						0.	0.	0.
(12) MR. J. A. KESSLER III DIRECTOR	1.00	X						0.	0.	0.
(13) MS. KRISTINA KOUTRAKOS DIRECTOR	1.00	X						0.	0.	0.
(14) MR. JOSEPH W. RICHMOND JR. DIRECTOR	1.00	X						0.	0.	0.
(15) MS. ANDREA ROBERTS DIRECTOR	1.00	X						0.	0.	0.
(16) MRS. DIANE SCHMIDT DIRECTOR	1.00	X						0.	0.	0.
(17) MR. ROBERT D. SWEENEY DIRECTOR	1.00	X						0.	0.	0.

**CHARLOTTEVILLE AREA COMMUNITY
FOUNDATION**

Form 990 (2021)

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Subtotal							594,974.	0.	83,092.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							594,974.	0.	83,092.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **4**

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

CHARLOTTEVILLE AREA COMMUNITY
FOUNDATION

Form 990 (2021)

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Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	57,576,138.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 51,548,348.				
	h Total. Add lines 1a-1f		57,576,138.				
Program Service Revenue	2 a _____	Business Code					
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		3,615,788.			3615788.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses ...	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	13,420,875.	34921205.		
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	0.	34921205.			
	c Gain or (loss)	7c	13,420,875.	0.			
d Net gain or (loss)			13,420,875.		13420875.		
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a INCOME FROM PASSTHROUGH	Business Code	900099	2,631,575.	2,567,907.	63,668.	
	b FEE INCOME		900099	349,042.	349,042.		
	c OTHER INCOME		900099	16,622.	16,622.		
	d All other revenue						
	e Total. Add lines 11a-11d			2,997,239.			
12 Total revenue. See instructions			77,610,040.	2,933,571.	63,668.	17036663.	

**CHARLOTTESVILLE AREA COMMUNITY
FOUNDATION**

Form 990 (2021)

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Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	31,356,156.	31,356,156.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	716,569.	716,569.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	350,000.	350,000.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	304,274.	212,992.	76,068.	15,214.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	904,272.	630,837.	246,599.	26,836.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	57,075.	39,828.	15,460.	1,787.
9 Other employee benefits	47,846.	33,365.	13,179.	1,302.
10 Payroll taxes	72,818.	50,839.	19,476.	2,503.
11 Fees for services (nonemployees):				
a Management				
b Legal	29,783.	14,891.	14,892.	
c Accounting	28,750.		28,750.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	1,572,038.	1,572,038.		
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	284,953.	233,358.	51,595.	
12 Advertising and promotion	41,355.	21,394.	17,349.	2,612.
13 Office expenses	9,726.	5,623.	3,930.	173.
14 Information technology	148,185.	74,761.	58,739.	14,685.
15 Royalties				
16 Occupancy	43,946.	30,949.	11,517.	1,480.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	6,672.	4,659.	1,784.	229.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	26,882.		26,882.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a ADMINISTRATIVE EXPENSES	216,206.	45,416.	168,752.	2,038.
b PROFESSIONAL DEVELOPMENT	24,592.	17,170.	6,577.	845.
c TEMPORARY EMPLOYEES	6,845.		6,845.	
d FUND EXPENSES	675.	675.		
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	36,249,618.	35,411,520.	768,394.	69,704.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

**CHARLOTTEVILLE AREA COMMUNITY
FOUNDATION**

Form 990 (2021)

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Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	901,112.	1	1,391,835.
	2 Savings and temporary cash investments	12,520,348.	2	14,107,050.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	15,000.	4	0.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 112,063.		
	b Less: accumulated depreciation	10b 112,063.	13,961.	10c 0.
	11 Investments - publicly traded securities	191,856,762.	11	257,845,110.
	12 Investments - other securities. See Part IV, line 11	47,598,463.	12	43,851,795.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	31,138,819.	15	22,494,879.
16 Total assets. Add lines 1 through 15 (must equal line 33)	284,044,465.	16	339,690,669.	
Liabilities	17 Accounts payable and accrued expenses	2,212.	17	37,886.
	18 Grants payable	690,833.	18	4,668,697.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	37,003,551.	25	45,336,050.
	26 Total liabilities. Add lines 17 through 25	37,696,596.	26	50,042,633.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	215,712,293.	27	267,099,299.
	28 Net assets with donor restrictions	30,635,576.	28	22,548,737.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	246,347,869.	32	289,648,036.
33 Total liabilities and net assets/fund balances	284,044,465.	33	339,690,669.	

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**CHARLOTTESVILLE AREA COMMUNITY
FOUNDATION**

Form 990 (2021)

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Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	77,610,040.
2	Total expenses (must equal Part IX, column (A), line 25)	2	36,249,618.
3	Revenue less expenses. Subtract line 2 from line 1	3	41,360,422.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	246,347,869.
5	Net unrealized gains (losses) on investments	5	8,204,231.
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	-6,264,486.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	289,648,036.

Part XII Financial Statements and Reporting

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

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

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

Form **990** (2021)

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

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization CHARLOTTEVILLE AREA COMMUNITY FOUNDATION

Employer identification number 54-1506312

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

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

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2 A school described in section 170(b)(1)(A)(ii).
3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii).
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv).
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi).
8 [X] A community trust described in section 170(b)(1)(A)(vi).
9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture.
10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income.
11 An organization organized and operated exclusively to test for public safety.
12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization.
b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s).
c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions).
d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated.
e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
f Enter the number of supported organizations
g Provide the following information about the supported organization(s).

Table with 6 main columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document? (Yes/No), (v) Amount of monetary support, (vi) Amount of other support. Includes a Total row at the bottom.

**CHARLOTTESVILLE AREA COMMUNITY
FOUNDATION**

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	16858956.	25108429.	10193778.	21420156.	57576138.	131157457
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	16858956.	25108429.	10193778.	21420156.	57576138.	131157457
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						48925217.
6 Public support. Subtract line 5 from line 4.						82232240.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	16858956.	25108429.	10193778.	21420156.	57576138.	131157457
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2477122.	3109259.	3350094.	3102103.	3615788.	15654366.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	62,793.	212,101.	123,370.	346,601.	63,668.	808,533.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		6,776.	4,203.	198,898.	16,622.	226,499.
11 Total support. Add lines 7 through 10						147846855
12 Gross receipts from related activities, etc. (see instructions)					12	1,201,126.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))	14	55.62	%
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	64.41	%
16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

**CHARLOTTEVILLE AREA COMMUNITY
FOUNDATION**

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

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

**CHARLOTTESVILLE AREA COMMUNITY
FOUNDATION**

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

**CHARLOTTESVILLE AREA COMMUNITY
FOUNDATION**

Part IV Supporting Organizations *(continued)*

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

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

**CHARLOTTEVILLE AREA COMMUNITY
FOUNDATION**

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

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

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

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

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

**CHARLOTTESVILLE AREA COMMUNITY
FOUNDATION**

Schedule A (Form 990) 2021

54-1506312 Page 7

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	1
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4 Amounts paid to acquire exempt-use assets	4
5 Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6 Other distributions (<i>describe in Part VI</i>). See instructions.	6
7 Total annual distributions. Add lines 1 through 6.	7
8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9 Distributable amount for 2021 from Section C, line 6	9
10 Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2021			
a From 2016			
b From 2017			
c From 2018			
d From 2019			
e From 2020			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017			
b Excess from 2018			
c Excess from 2019			
d Excess from 2020			
e Excess from 2021			

Schedule A (Form 990) 2021

CHARLOTTESVILLE AREA COMMUNITY
FOUNDATION

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

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2021

Name of the organization

**CHARLOTTESVILLE AREA COMMUNITY
FOUNDATION**

Employer identification number

54-1506312

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

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

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

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

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

Name of organization CHARLOTTESVILLE AREA COMMUNITY FOUNDATION	Employer identification number 54-1506312
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 1,563,750.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 2,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 1,660,858.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 1,159,749.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 34,921,205.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
6		\$ 6,463,181.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization CHARLOTTESVILLE AREA COMMUNITY FOUNDATION	Employer identification number 54-1506312
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ <u>3,280,646.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
8		\$ <u>2,996,268.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization CHARLOTTESVILLE AREA COMMUNITY FOUNDATION	Employer identification number 54-1506312
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
5	2,758.87757 UNITS OF POSEIDON HOLDING, LLC	\$ 34,921,205.	12/08/21
6	2800 SHRS APPLE, 1300 SHRS ANALOG, 1250 SHRS APPLIED MATERIALS, 400 SHRS ANTHEM AND VARIOUS STOCKS	\$ 6,463,181.	12/20/21
7	80,665 SHRS INOVALON HLDS STOCK	\$ 3,280,646.	10/19/21
8	SHARES OF SHAMROCK CORP	\$ 2,996,268.	06/28/21
		\$ _____	_____
		\$ _____	_____

Name of organization CHARLOTTESVILLE AREA COMMUNITY FOUNDATION	Employer identification number 54-1506312
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) ▶ \$ _____
 Use duplicate copies of Part III if additional space is needed.

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

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**
▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization CHARLOTTEVILLE AREA COMMUNITY FOUNDATION **Employer identification number** 54-1506312

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	218	99
2 Aggregate value of contributions to (during year)	57,413,276.	4,674,409.
3 Aggregate value of grants from (during year)	26,636,678.	6,869,788.
4 Aggregate value at end of year	221,143,790.	39,809,628.
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

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

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

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

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

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

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

Schedule D (Form 990) 2021

**CHARLOTTEVILLE AREA COMMUNITY
FOUNDATION**

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange program
 - e** Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

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

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	60,000.	60,000.	60,000.	60,000.	60,000.
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	60,000.	60,000.	60,000.	60,000.	60,000.

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

- a** Board designated or quasi-endowment _____%
- b** Permanent endowment 100%
- c** Term endowment _____%

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

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

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

	Yes	No
3a(i)		<input checked="" type="checkbox"/>
3a(ii)		<input checked="" type="checkbox"/>
3b		

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

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		112,063.	112,063.	0.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				0.

**CHARLOTTESVILLE AREA COMMUNITY
FOUNDATION**

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) INVESTMENT LIMITED		
(B) PARTNERSHIP	43,851,795.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	43,851,795.	

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1) BENEFICIAL INTEREST IN TRUSTS	22,488,737.
(2) HEALTH & VISION INSURANCE WITHHOLDING	6,142.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	22,494,879.

Part X Other Liabilities.

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

(a) Description of liability	(b) Book value
1. (1) Federal income taxes	
(2) AGENCY FUNDS PAYABLE	45,336,050.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	45,336,050.

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

CHARLOTTESVILLE AREA COMMUNITY
FOUNDATION

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

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

1	Total revenue, gains, and other support per audited financial statements		1	78,036,259.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	8,204,231.	
b	Donated services and use of facilities	2b	58,512.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	-3,632,911.	
e	Add lines 2a through 2d	2e	4,629,832.	
3	Subtract line 2e from line 1	3	73,406,427.	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	4,203,613.	
c	Add lines 4a and 4b	4c	4,203,613.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	77,610,040.	

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

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

1	Total expenses and losses per audited financial statements		1	34,736,092.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	58,512.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	58,512.	
3	Subtract line 2e from line 1	3	34,677,580.	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	1,572,038.	
c	Add lines 4a and 4b	4c	1,572,038.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	36,249,618.	

Part XIII Supplemental Information.

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

PART V, LINE 4:

ONE FUND IS PERMANENTLY RESTRICTED SO ONLY INCOME COULD BE SPENT.

PART X, LINE 2:

THE FOUNDATION FOLLOWS THE FASB GUIDANCE FOR HOW UNCERTAIN TAX POSITIONS SHOULD BE RECOGNIZED, MEASURED, DISCLOSED AND PRESENTED IN THE FINANCIAL STATEMENTS. THIS REQUIRES THE EVALUATION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN THE COURSE OF PREPARING THE FOUNDATION'S TAX RETURNS TO DETERMINE WHETHER THE TAX POSITIONS ARE "MORE-LIKELY-THAN-NOT" OF BEING SUSTAINED "WHEN CHALLENGED" OR "WHEN EXAMINED" BY THE APPLICABLE TAX AUTHORITY. TAX POSITIONS NOT DEEMED TO MEET THE MORE-LIKELY-THAN-NOT THRESHOLD WOULD BE RECORDED AS A TAX EXPENSE AND LIABILITY IN THE CURRENT

CHARLOTTESVILLE AREA COMMUNITY
FOUNDATION

Part XIII Supplemental Information (continued)

YEAR. MANAGEMENT EVALUATED THE FOUNDATION'S TAX POSITION AND CONCLUDED THAT THE FOUNDATION HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISION OF THIS GUIDANCE. THE FOUNDATION IS NOT CURRENTLY UNDER AUDIT BY ANY TAX JURISDICTION.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

CHANGE IN VALUE SPLIT INTEREST AGREEMENTS -3,632,911.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

INCOME FROM PASSTHROUGH ENTITY 2,631,575.

INVESTMENT MANAGEMENT FEES 1,572,038.

TOTAL TO SCHEDULE D, PART XI, LINE 4B 4,203,613.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

INVESTMENT MANAGEMENT FEES 1,572,038.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
**CHARLOTTEVILLE AREA COMMUNITY
FOUNDATION**

Employer identification number
54-1506312

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

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,	0	0	GRANT MAKING		350,000.
3 a Subtotal	0	0			350,000.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			350,000.

CHARLOTTESVILLE AREA COMMUNITY
FOUNDATION

Schedule F (Form 990) 2021

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	JVD LIBRARY AND RESOURCE CENTRE PROJECT	350,000.	WIRE AND CHECK	0.		CASH

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **1**

3 Enter total number of other organizations or entities **1**

**CHARLOTTESVILLE AREA COMMUNITY
FOUNDATION**

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

CHARLOTTESVILLE AREA COMMUNITY
FOUNDATION

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

Part V Supplemental Information

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

FORM 990, SCHEDULE F, PART I, LINE 2

THE FOUNDATION MONITORS THIS GRANT BY HAVING DIRECT COMMUNICATION WITH THE GRANTEE. UPDATES ARE REQUIRED QUARTERLY REGARDING THE USE OF THE GRANT UNTIL FUNDS HAVE BEEN DEPLETED. UPON COMPLETION OF THE GRANT, A FINAL REPORT IS DUE TO THE FOUNDATION SHOWING PROGRESS OF THE GRANT AND BUDGET TO ACTUAL ANALYSIS.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization **CHARLOTTESVILLE AREA COMMUNITY
FOUNDATION**

**Employer identification number
54-1506312**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
IX ART PARK FOUNDATION 201 EAST MAIN STREET CHARLOTTESVILLE, VA 22902	83-3099795	501(C)(3)	8,000.	0.			GENERAL PURPOSES
100 BLACK MEN OF CENTRAL VIRGINIA P. O. BOX 8226 CHARLOTTESVILLE, VA 22906	30-0598112	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
100 BLACK MEN OF CENTRAL VIRGINIA P. O. BOX 8226 CHARLOTTESVILLE, VA 22906	30-0598112	501(C)(3)	15,000.	0.			M3 SUMMER 2022 PROGRAM
ADIPSY P.O. BOX 16183 CHESAPEAKE, VA 23328	46-1951781	501(C)(3)	50,000.	0.			GENERAL PURPOSES
ADULT COMMUNITY EDUCATION P. O. BOX 872 LOUISA, VA 23093	54-1670786	501(C)(3)	6,000.	0.			2021 LOUISA CO COMM FUND GRANT
ADVANCED ENERGY ECONOMY INSTITUTE 1010 VERMONT AVE. NW WASHINGTON, DC 20005	80-0373801	501(C)(3)	45,000.	0.			GENERAL OPERATING GRANT TO BE USED IN THE COMMONWEALTH OF VIRGINIA

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ **421.**

3 Enter total number of other organizations listed in the line 1 table ▶ **12.**

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

Schedule I (Form 990) 2021

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

CHARLOTTESVILLE AREA COMMUNITY
FOUNDATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AFFORDABLE HOUSING OPPORTUNITY FUND - P.O. BOX 1467 - CHARLOTTESVILLE, VA 22902	84-2840147	501(C)(3)	1,020,938.	0.			GENERAL PURPOSES
AFFORDABLE HOUSING OPPORTUNITY FUND - P.O. BOX 1467 - CHARLOTTESVILLE, VA 22902	84-2840147	501(C)(3)	750,000.	0.			ONGOING REDEVELOPMENT WORK
AFRICAN-AMERICAN TEACHING FELLOWS OF CHARLOTTESVILLE-ALBEMARLE, INC. - P. O. BOX 5064 - CHARLOTTESVILLE, VA 22905	83-0413067	501(C)(3)	15,000.	0.			2021 ENRICHING COMMUNITIES GRANT
AFRICAN-AMERICAN TEACHING FELLOWS OF CHARLOTTESVILLE-ALBEMARLE, INC. - P. O. BOX 5064 - CHARLOTTESVILLE, VA 22905	83-0413067	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
AFRICAN-AMERICAN TEACHING FELLOWS OF CHARLOTTESVILLE-ALBEMARLE, INC. - P. O. BOX 5064 - CHARLOTTESVILLE, VA 22905	83-0413067	501(C)(3)	75,000.	0.			GENERAL PURPOSES
AGUA HEDIONDA LAGOON FOUNDATION 1580 CANNON RD CARLSBAD, CA 92008	33-0411888	501(C)(3)	10,000.	0.			GENERAL PURPOSES
ALBEMARLE CHARLOTTESVILLE HISTORICAL SOCIETY - 200 SECOND STREET, NE - CHARLOTTESVILLE, VA 22902-5245	54-6052638	501(C)(3)	20,000.	0.			GENERAL PURPOSES
ALBEMARLE COMMONWEALTH'S ATTORNEY OFFICE - 410 EAST HIGH STREET - CHARLOTTESVILLE, VA 22902	54-6001102	GOV	9,000.	0.			2021 BAMA WORKS GRANT
ALBEMARLE COUNTY 1600 FIFTH STREET CHARLOTTESVILLE, VA 22902	54-6001102	GOV	75,000.	0.			SUPPORTING THE PROCUREMENT OF A MOBILE HEALTH VAN FOR THE BLUE RIDGE HEALTH DISTRICT

Schedule I (Form 990)

CHARLOTTESVILLE AREA COMMUNITY
FOUNDATION

Schedule I (Form 990)

54-1506312

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALBEMARLE COUNTY POLICE FOUNDATION PO BOX 5043 CHARLOTTESVILLE, VA 22905	54-1642231	501(C)(3)	15,000.	0.			GENERAL PURPOSES
ALBEMARLE COUNTY POLICE FOUNDATION PO BOX 5043 CHARLOTTESVILLE, VA 22905	54-1642231	501(C)(3)	15,000.	0.			SUPPORT OF ANNUAL AWARDS BANQUET
ALBEMARLE COUNTY POLICE FOUNDATION PO BOX 5043 CHARLOTTESVILLE, VA 22905	54-1642231	501(C)(3)	7,000.	0.			SUPPORT OF SANTA ON PATROL
ALBEMARLE COUNTY PUBLIC SCHOOLS 401 MCINTIRE ROAD CHARLOTTESVILLE, VA 22902-4596	54-6001102	501(C)(3)	10,000.	0.			MUSIC SCHOLARSHIPS FOR AHS GRADUATING SENIORS, IN HONOR OF LEROI'S FATHER
ALBEMARLE HOUSING IMPROVEMENT PROGRAM - 2127 BERKMAR DRIVE - CHARLOTTESVILLE, VA 22901	54-1028220	501(C)(3)	10,000.	0.			2021 ENRICHING COMMUNITIES GRANT
ALBEMARLE HOUSING IMPROVEMENT PROGRAM - 2127 BERKMAR DRIVE - CHARLOTTESVILLE, VA 22901	54-1028220	501(C)(3)	7,500.	0.			BAMAWORKS 2021 GRANT
ALBEMARLE HOUSING IMPROVEMENT PROGRAM - 2127 BERKMAR DRIVE - CHARLOTTESVILLE, VA 22901	54-1028220	501(C)(3)	73,000.	0.			GENERAL PURPOSES
ALL BLESSINGS FLOW 3509 W. MONACAN DR. CHARLOTTESVILLE, VA 22901-1029	82-1806020	501(C)(3)	10,000.	0.			2021 ENRICHING COMMUNITIES GRANT
ALL BLESSINGS FLOW 3509 W. MONACAN DR. CHARLOTTESVILLE, VA 22901-1029	82-1806020	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT

Schedule I (Form 990)

CHARLOTTESVILLE AREA COMMUNITY
FOUNDATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALL BLESSINGS FLOW 3509 W. MONACAN DR. CHARLOTTESVILLE, VA 22901-1029	82-1806020	501(C)(3)	10,000.	0.			GENERAL PURPOSES
ALLEGHENY MOUNTAIN INSTITUTE P.O. BOX 542 STAUNTON, VA 24402	46-5717620	501(C)(3)	10,000.	0.			SUPPORTING PARTICIPANTS IN THE ALLEGHENY MOUNTAIN INSTITUTE FARM AND FOOD FELLOWSHIP PROGRAM
ALLIANCE FOR GLOBAL JUSTICE 225 E 26TH ST #1 TUCSON, AZ 85713	52-2094677	501(C)(3)	10,000.	0.			THE ACCOUNT OF NEVERAGAIN ACTION
ALLIANCE FOR INTERFAITH MINISTRIES (AIM) - PO BOX 7331 - CHARLOTTESVILLE, VA 22906	52-1258674	501(C)(3)	12,000.	0.			2021 ENRICHING COMMUNITIES GRANT
ALLIANCE FOR INTERFAITH MINISTRIES (AIM) - PO BOX 7331 - CHARLOTTESVILLE, VA 22906	52-1258674	501(C)(3)	7,500.	0.			BAMAWORKS 2021 GRANT
ALLIANCE FRANCAISE DE CHARLOTTESVILLE VIRGINIA INC. - 700 HARRIS ST. - CHARLOTTESVILLE, VA 22903	54-1694300	501(C)(3)	6,000.	0.			BAMAWORKS 2021 GRANT
AMERICAN CHESTNUT FOUNDATION 50 NORTH MERRIMON AVE., SUITE 115 ASHEVILLE, NC 28804	41-1483019	501(C)(3)	20,000.	0.			IMPROVING THE USABILITY AND INTERACTIVITY OF "DENTATABASE"
AMERICAN PRAIRIE RESERVE PO BOX 908 BOZEMAN, MT 59771	81-0541893	501(C)(3)	10,000.	0.			THE GENERAL FUND
APPALACHIAN MOUNTAIN ADVOCATES PO BOX 507 LEWISBURG, WV 24901	55-0781483	501(C)(3)	50,000.	0.			STOPPING THE MVP, MVP SOUTHGATE, LAMBERT COMPRESSOR STATION, THE CHICKAHOMINY POWER PLANT

Schedule I (Form 990)

CHARLOTTESVILLE AREA COMMUNITY
FOUNDATION

Schedule I (Form 990)

54-1506312

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
APPALACHIAN VOICES 589 WEST KING ST. BOONE, NC 28607	56-2049956	501(C)(3)	45,000.	0.			GENERAL OPERATING GRANT
APPALACHIAN VOICES 589 WEST KING ST. BOONE, NC 28607	56-2049956	501(C)(3)	50,000.	0.			STOPPING THE MVP, MVP SOUTHGATE, LAMBERT COMPRESSOR STATION, THE CHICKAHOMINY POWER PLANT
ARTS CENTER OF ORANGE P. O. BOX 13 ORANGE, VA 22960	54-1840609	501(C)(3)	12,000.	0.			2021 ENRICHING COMMUNITIES GRANT
ARTS CORPS 4408 DELRIDGE WAY SW, SUITE 110 SEATTLE, WA 98106	91-2044679	501(C)(3)	100,000.	0.			GENERAL PURPOSES
AUTISM SANCTUARY INC 2860 PEA RIDGE ROAD CHARLOTTESVILLE, VA 22901	84-4794206	501(C)(3)	7,000.	0.			2021 ENRICHING COMMUNITIES GRANT
AUTISM SANCTUARY INC 2860 PEA RIDGE ROAD CHARLOTTESVILLE, VA 22901	84-4794206	501(C)(3)	6,000.	0.			BAMAWORKS 2021 GRANT
BAMA WORKS FOUNDATION 700 HARRIS STREET #201 CHARLOTTESVILLE, VA 22902	54-1893960	501(C)(3)	50,000.	0.			A TENT STRUCTURE ON THE OLD K-MART SITE TO SERVE AS A VACCINATION CENTER
BAMA WORKS FOUNDATION 700 HARRIS STREET #201 CHARLOTTESVILLE, VA 22902	54-1893960	501(C)(3)	8,925.	0.			EXPENSES/SUPPLIES RELATED TO AGES 5-11 VACCINATION CAMPAIGN
BAMA WORKS FOUNDATION 700 HARRIS STREET #201 CHARLOTTESVILLE, VA 22902	54-1893960	501(C)(3)	150,000.	0.			GENERAL PURPOSES

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BEATDIABETES PO BOX 4562 CHARLOTTESVILLE, VA 22905	36-4943518	501(C)(3)	10,000.	0.			GENERAL PURPOSES
BEN HAIR JUST SWIM FOR LIFE FOUNDATION - 2830 WATTS PASSAGE - CHARLOTTESVILLE, VA 22911	27-3028725	501(C)(3)	7,000.	0.			BAMAWORKS 2021 GRANT
BEYOND BOUNDARIES 3904 PATTERSON AVE. RICHMOND, VA 23221	47-1935834	501(C)(3)	10,000.	0.			SUPPORTING VETERAN/ACTIVE DUTY MILITARY OUTDOOR PROGRAMS IN HONOR OF SHEP ROEPPER
BIG BROTHERS BIG SISTERS OF THE CENTRAL BLUE RIDGE - 420 EAST MAIN STREET, SUITE B - CHARLOTTESVILLE, VA 22902	54-1108066	501(C)(3)	20,000.	0.			GENERAL PURPOSES
BIRTH SISTERS OF CHARLOTTESVILLE 1308 CHESAPEAKE ST. CHARLOTTESVILLE, VA 22902	85-0967804	501(C)(3)	14,000.	0.			2021 ENRICHING COMMUNITIES GRANT
BIRTH SISTERS OF CHARLOTTESVILLE 1308 CHESAPEAKE ST. CHARLOTTESVILLE, VA 22902	85-0967804	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
BIRTH SISTERS OF CHARLOTTESVILLE 1308 CHESAPEAKE ST. CHARLOTTESVILLE, VA 22902	85-0967804	501(C)(3)	75,000.	0.			OPERATING SUPPORT
BLUE RIDGE AREA FOOD BANK P. O. BOX 937 VERONA, VA 24482-0937	52-1202644	501(C)(3)	12,000.	0.			2021 ENRICHING COMMUNITIES GRANT
BLUE RIDGE AREA FOOD BANK P. O. BOX 937 VERONA, VA 24482-0937	52-1202644	501(C)(3)	25,000.	0.			ANNUAL SUPPORT

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BLUE RIDGE AREA FOOD BANK P. O. BOX 937 VERONA, VA 24482-0937	52-1202644	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
BLUE RIDGE AREA FOOD BANK P. O. BOX 937 VERONA, VA 24482-0937	52-1202644	501(C)(3)	68,000.	0.			GENERAL PURPOSES
BLUE RIDGE HEALTH CENTER 4038 THOMAS NELSON HIGHWAY ARRINGTON, VA 22922	54-1222147	501(C)(3)	15,000.	0.			ANNUAL SUPPORT
BLUE RIDGE MEDICAL CENTER 4038 THOMAS NELSON HWY ARRINGTON, VA 22922	54-1222147	501(C)(3)	7,000.	0.			BAMAWORKS 2021 GRANT
BON SECOURS RICHMOND HEALTH CARE FOUNDATION - 5008 MONUMENT AVENUE - RICHMOND, VA 23230	20-1072726	501(C)(3)	37,500.	0.			SARAH GARLAND JONES COMMUNITY CENTER AND THE MYRTLE JOHNSON PATIO
BOTANICAL GARDEN OF THE PIEDMONT P.O. BOX 6224 CHARLOTTESVILLE, VA 22906	90-0395190	501(C)(3)	6,000.	0.			BAMAWORKS 2021 GRANT
BOTANICAL GARDEN OF THE PIEDMONT P.O. BOX 6224 CHARLOTTESVILLE, VA 22906	90-0395190	501(C)(3)	16,000.	0.			GENERAL PURPOSES
BOYS & GIRLS CLUB OF HENDERSON PO BOX 1460 HENDERSONVILLE, NC 28793	56-1803125	501(C)(3)	30,000.	0.			GENERAL PURPOSES
BOYS & GIRLS CLUBS OF CENTRAL VIRGINIA - P.O. BOX 707 - CHARLOTTESVILLE, VA 22902	54-1602004	501(C)(3)	25,000.	0.			ANNUAL SUPPORT

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BOYS & GIRLS CLUBS OF CENTRAL VIRGINIA - P.O. BOX 707 - CHARLOTTESVILLE, VA 22902	54-1602004	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
BOYS & GIRLS CLUBS OF CENTRAL VIRGINIA - P.O. BOX 707 - CHARLOTTESVILLE, VA 22902	54-1602004	501(C)(3)	191,666.	0.			BUILDING GREAT FUTURES CAMPAIGN
BOYS & GIRLS CLUBS OF CENTRAL VIRGINIA - P.O. BOX 707 - CHARLOTTESVILLE, VA 22902	54-1602004	501(C)(3)	131,500.	0.			GENERAL PURPOSES
BOYS & GIRLS CLUBS OF CENTRAL VIRGINIA - P.O. BOX 707 - CHARLOTTESVILLE, VA 22902	54-1602004	501(C)(3)	8,500.	0.			JACK JOUETT AND JAMES RIVER AFTER SCHOOL MEAL PROGRAMS FOR 2021-22 SCHOOL YEAR
BOYS & GIRLS CLUBS OF CENTRAL VIRGINIA - P.O. BOX 707 - CHARLOTTESVILLE, VA 22902	54-1602004	501(C)(3)	10,000.	0.			LIVING WAGE INITIATIVE
BOYS & GIRLS CLUBS OF CENTRAL VIRGINIA - P.O. BOX 707 - CHARLOTTESVILLE, VA 22902	54-1602004	501(C)(3)	10,000.	0.			MILLBANK
BRIDGE OUTREACH CHURCH P.O. BOX 2402 CHARLOTTESVILLE, VA 22902	51-0671396	501(C)(3)	10,000.	0.			GENERAL PURPOSES
BRIDGEHAMPTON CHILD CARE & RECREATIONAL CENTER - 551 BRIDGEHAMPTON/SAG HARBOR TPK - BRIDGEHAMPTON, NY 11932	11-6036310	501(C)(3)	11,000.	0.			GENERAL PURPOSES
BRIDGEHAMPTON CHILD CARE & RECREATIONAL CENTER - 551 BRIDGEHAMPTON/SAG HARBOR TPK - BRIDGEHAMPTON, NY 11932	11-6036310	501(C)(3)	14,000.	0.			GENERAL PURPOSES

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BRIDGEWATER COLLEGE 402 EAST COLLEGE STREET BRIDGEWATER, VA 22812	54-0506306	501(C)(3)	7,000.	0.			GENERAL PURPOSES
BRODY JEWISH CENTER, HILLEL AT UVA 1824 UNIVERSITY CIRCLE CHARLOTTESVILLE, VA 22903	54-6061871	501(C)(3)	40,000.	0.			NEAR-TERM STAFFING NEEDS
BUILDING GOODNESS FOUNDATION 128 CARLTON ROAD CHARLOTTESVILLE, VA 22902	54-1956136	501(C)(3)	10,000.	0.			2021 ENRICHING COMMUNITIES GRANT
BUILDING GOODNESS FOUNDATION 128 CARLTON ROAD CHARLOTTESVILLE, VA 22902	54-1956136	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
BUILDING GOODNESS FOUNDATION 128 CARLTON ROAD CHARLOTTESVILLE, VA 22902	54-1956136	501(C)(3)	100,000.	0.			CHARLOTTESVILLE BUILDS PROGRAM (HOME RENOVATION IN AREA); SCHOOL IN GUATEMALA
BURLEY VARSITY CLUB 819 HENRY AVENUE CHARLOTTESVILLE, VA 22903	20-8829720	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
CAMFED USA FOUNDATION 466 GEARY STREET SUITE 400 SAN FRANCISCO, CA 94102	54-2033897	501(C)(3)	30,000.	0.			GENERAL PURPOSES
CAMP HOLIDAY TRAILS 400 CAMP HOLIDAY TRAILS LANE CHARLOTTESVILLE, VA 22903	54-0922028	501(C)(3)	25,000.	0.			THE VEHICLE MENTIONED IN CACF GIVING OPPORTUNITY NEWSLETTER
CAMP TLC (TOGETHER LIVING A CHALLENGE) - 442 WEST OCEAN BLVD, #408 - LONG BEACH, CA 90802	22-3453810	501(C)(3)	25,000.	0.			GENERAL SUPPORT

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CARNEGIE HALL CORP. 881 7TH AVE NEW YORK, NY 10019	13-1923626	501(C)(3)	25,000.	0.			GENERAL PURPOSES
CAT ACTION TEAM 1700 BENT TREE COURT CHARLOTTESVILLE, VA 22902-7231	83-1970767	501(C)(3)	7,000.	0.			BAMAWORKS 2021 GRANT
CATHOLIC CHURCH OF THE VISITATION PO BOX 38 TOPPING, VA 23169	54-1354067	501(C)(3)	15,000.	0.			NEW WORSHIP CENTER.
CENTER FOR HEIRS' PROPERTY PRESERVATION - 1535 SAM RITTENBERG BLVD., SUITE D - CHARLESTON, SC 29407	52-2452879	501(C)(3)	10,000.	0.			GENERAL PURPOSES
CENTER FOR NATURAL CAPITAL P.O. BOX 901 ORANGE, VA 22960	20-1996189	501(C)(3)	10,000.	0.			RAPIDAN INSTITUTE AND THE RAPIDAN FISH PASSAGE PROJECT
CENTER FOR NONPROFIT EXCELLENCE 1701-A ALLIED ST. CHARLOTTESVILLE, VA 22903	20-3412827	501(C)(3)	7,000.	0.			BAMAWORKS 2021 GRANT
CENTER FOR NONPROFIT EXCELLENCE 1701-A ALLIED ST. CHARLOTTESVILLE, VA 22903	20-3412827	501(C)(3)	23,000.	0.			GENERAL PURPOSES
CENTER FOR NONPROFIT EXCELLENCE 1701-A ALLIED ST. CHARLOTTESVILLE, VA 22903	20-3412827	501(C)(3)	7,500.	0.			THE BOARD ACADEMY
CENTRA HEALTH FOUNDATION 1920 ATHERHOLT RD LYNCHBURG, VA 24501	54-1604094	501(C)(3)	10,000.	0.			UNRESTRICTED USE

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CENTRAL PARK CONSERVANCY 14 EAST 60TH STREET NEW YORK, NY 10022	13-3022855	501(C)(3)	25,000.	0.			PROGRAM SUPPORT
CENTRAL VIRGINIA FARM WORKERS INITIATIVE - 3130 LAUREL ROAD - SHIPMAN, VA 22971	85-1931230	501(C)(3)	7,500.	0.			BAMAWORKS 2021 GRANT
CENTRAL VIRGINIA FARM WORKERS INITIATIVE - 3130 LAUREL ROAD - SHIPMAN, VA 22971	85-1931230	501(C)(3)	25,000.	0.			GENERAL PURPOSES
CENTRAL VIRGINIA HEALTH SERVICES INC. - PO BOX 220 - NEW CANTON, VA 23123	54-0887287	501(C)(3)	8,500.	0.			2021 BAMA WORKS GRANT
CENTRAL VIRGINIA HEALTH SERVICES INC. - PO BOX 220 - NEW CANTON, VA 23123	54-0887287	501(C)(3)	12,000.	0.			2021 ENRICHING COMMUNITIES GRANT
CERES INC. 99 CHAUNCY STREET, 6TH FLOOR BOSTON, MA 02111	22-3053747	501(C)(3)	45,000.	0.			GENERAL OPERATING IN VIRGINIA
CHABAD HOUSE OF DELMAR 109 ELSMERE AVENUE DELMAR, NY 12054	14-1795394	501(C)(3)	10,000.	0.			GENERAL PURPOSES
CHABAD OF CHARLOTTESVILLE 2014 LEWIS MOUNTAIN ROAD CHARLOTTESVILLE, VA 22903	38-3661207	501(C)(3)	10,000.	0.			SUPPORT JEWISH STUDENT ACTIVITY AT UVA
CHARLOTTESVILLE ABUNDANT LIFE MINISTRIES - P. O. BOX 71 - CHARLOTTESVILLE, VA 22902-0071	54-1858588	501(C)(3)	12,000.	0.			2021 ENRICHING COMMUNITIES GRANT

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CHARLOTTESVILLE ABUNDANT LIFE MINISTRIES - P. O. BOX 71 - CHARLOTTESVILLE, VA 22902-0071	54-1858588	501(C)(3)	8,000.	0.			BAMAWORKS 2021 GRANT
CHARLOTTESVILLE BALLET 1885 SEMINOLE TRAIL, SUITE 203 CHARLOTTESVILLE, VA 22901	90-0545068	501(C)(3)	8,000.	0.			2021 ENRICHING COMMUNITIES GRANT
CHARLOTTESVILLE BALLET 1885 SEMINOLE TRAIL, SUITE 203 CHARLOTTESVILLE, VA 22901	90-0545068	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
CHARLOTTESVILLE CITY SCHOOLS 1562 DAIRY ROAD CHARLOTTESVILLE, VA 22903	54-6001203	501(C)(3)	10,000.	0.			2021 BAMA WORKS GRANT
CHARLOTTESVILLE COMMUNITY BIKES 917 #D PRESTON AVE CHARLOTTESVILLE, VA 22903	84-5088273	501(C)(3)	7,000.	0.			2021 ENRICHING COMMUNITIES GRANT
CHARLOTTESVILLE COMMUNITY BIKES 405 AVON STREET CHARLOTTESVILLE, VA 22902	84-5088273	501(C)(3)	6,000.	0.			BAMAWORKS 2021 GRANT
CHARLOTTESVILLE FREE CLINIC 901 PRESTON AVE., SUITE 301 CHARLOTTESVILLE, VA 22903	54-1610405	501(C)(3)	10,000.	0.			2021 ENRICHING COMMUNITIES GRANT
CHARLOTTESVILLE FREE CLINIC 901 PRESTON AVE., SUITE 301 CHARLOTTESVILLE, VA 22903	54-1610405	501(C)(3)	82,342.	0.			ANNUAL PAYOUT
CHARLOTTESVILLE FREE CLINIC 901 PRESTON AVE., SUITE 301 CHARLOTTESVILLE, VA 22903	54-1610405	501(C)(3)	5,500.	0.			BAMAWORKS 2021 GRANT

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CHARLOTTESVILLE FREE CLINIC 901 PRESTON AVE., SUITE 301 CHARLOTTESVILLE, VA 22903	54-1610405	501(C)(3)	70,000.	0.			GENERAL PURPOSES
CHARLOTTESVILLE POLICE DEPARTMENT FOUNDATION - P. O. BOX 2631 - CHARLOTTESVILLE, VA 22902	38-3688424	501(C)(3)	15,000.	0.			GENERAL PURPOSES
CHARLOTTESVILLE PUBLIC HOUSING ASSOCIATION OF RESIDENTS - 1000 PRESTON AVE, SUITE B - CHARLOTTESVILLE, VA 22903	54-1923243	501(C)(3)	15,000.	0.			2021 ENRICHING COMMUNITIES GRANT
CHARLOTTESVILLE PUBLIC HOUSING ASSOCIATION OF RESIDENTS - 1000 PRESTON AVE, SUITE B - CHARLOTTESVILLE, VA 22903	54-1923243	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
CHARLOTTESVILLE PUBLIC HOUSING ASSOCIATION OF RESIDENTS - 1000 PRESTON AVE, SUITE B - CHARLOTTESVILLE, VA 22903	54-1923243	501(C)(3)	64,660.	0.			GENERAL PURPOSES
CHARLOTTESVILLE REDEVELOPMENT AND HOUSING AUTHORITY - C/O CITY OF CHARLOTTESVILLE - CHARLOTTESVILLE, VA 22902	54-0653098	501(C)(3)	10,000.	0.			2021 ENRICHING COMMUNITIES GRANT
CHARLOTTESVILLE REDEVELOPMENT AND HOUSING AUTHORITY - C/O CITY OF CHARLOTTESVILLE - CHARLOTTESVILLE, VA 22902	54-0653098	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
CHARLOTTESVILLE REDEVELOPMENT AND HOUSING AUTHORITY - C/O CITY OF CHARLOTTESVILLE - CHARLOTTESVILLE, VA 22902	54-0653098	501(C)(3)	68,900.	0.			GENERAL PURPOSES
CHARLOTTESVILLE TOMORROW P.O BOX 1591 CHARLOTTESVILLE, VA 22902	20-3013557	501(C)(3)	10,000.	0.			ANNUAL FUND

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CHARLOTTESVILLE TOMORROW P.O BOX 1591 CHARLOTTESVILLE, VA 22902	20-3013557	501(C)(3)	10,000.	0.			ANNUAL SUPPORT
CHARLOTTESVILLE TOMORROW P.O BOX 1591 CHARLOTTESVILLE, VA 22902	20-3013557	501(C)(3)	6,000.	0.			BAMAWORKS 2021 GRANT
CHARLOTTESVILLE TOMORROW P.O BOX 1591 CHARLOTTESVILLE, VA 22902	20-3013557	501(C)(3)	40,000.	0.			GENERAL PURPOSES
CHARLOTTESVILLE-ALBEMARLE RESCUE SQUAD - 828 MCINTIRE ROAD - CHARLOTTESVILLE, VA 22902	54-0784350	501(C)(3)	15,000.	0.			THE AREA OF GREATEST NEED
CHARLOTTESVILLE-ALBEMARLE SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS - P. O. BOX 7047 - CHARLOTTESVILLE, VA 22906	54-0595009	501(C)(3)	16,500.	0.			GENERAL PURPOSES
CHARLOTTESVILLE-ALBEMARLE SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS - P. O. BOX 7047 - CHARLOTTESVILLE, VA 22906	54-0595009	501(C)(3)	58,150.	0.			PURCHASE SUPPORT OF NEW EQUIPMEN
CHESAPEAKE BAY FOUNDATION 6 HERNDON AVENUE ANNAPOLIS, MD 21403	52-6065757	501(C)(3)	400,000.	0.			GENERAL PURPOSES
CHESAPEAKE BAY FOUNDATION 6 HERNDON AVENUE ANNAPOLIS, MD 21403	52-6065757	501(C)(3)	20,000.	0.			PREVENTING ANY NEW FRACKED GAS COMPRESSOR STATIONS
CHESAPEAKE CLIMATE ACTION NETWORK P.O. BOX 11138 TAKOMA PARK, MD 20913	11-3644283	501(C)(3)	15,000.	0.			CAPACITY GRANT TO ENABLE CCAN TO CONTRACT WITH INNOVATIVE STRATEGIES TO PROVIDE

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CHESAPEAKE CLIMATE ACTION NETWORK P.O. BOX 11138 TAKOMA PARK, MD 20913	11-3644283	501(C)(3)	45,000.	0.			GENERAL OPERATING GRANT
CHESAPEAKE CLIMATE ACTION NETWORK P.O. BOX 11138 TAKOMA PARK, MD 20913	11-3644283	501(C)(3)	10,000.	0.			PREVENTING ANY NEW FRACKED GAS INFRASTRUCTURE IN VIRGINIA AND STOPPING
CHILD HEALTH PARTNERSHIP 1469 GREENBRIER PLACE CHARLOTTESVILLE, VA 22901	26-2499048	501(C)(3)	8,000.	0.			2021 LOUISA CO COMM FUND GRANT
CHILD HEALTH PARTNERSHIP 1469 GREENBRIER PLACE CHARLOTTESVILLE, VA 22901	26-2499048	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
CHILD HEALTH PARTNERSHIP 1469 GREENBRIER PLACE CHARLOTTESVILLE, VA 22901	26-2499048	501(C)(3)	55,000.	0.			GENERAL PURPOSES
CHILD HEALTH PARTNERSHIP 1469 GREENBRIER PLACE CHARLOTTESVILLE, VA 22901	26-2499048	501(C)(3)	20,000.	0.			NEIGHBORHOOD FOCUSED HOME VISITING TEAM CONTINUED SUPPORT
CHILD HEALTH PARTNERSHIP 1469 GREENBRIER PLACE CHARLOTTESVILLE, VA 22901	26-2499048	501(C)(3)	10,000.	0.			SUPPORTING COMMUNITY EFFORTS TO ASSIST YOUNG FAMILIES IN NEED OF HEALTH AND SUPPORTIVE
CHRIST EPISCOPAL CHURCH 100 W. JEFFERSON ST. CHARLOTTESVILLE, VA 22902		CHURCH	43,000.	0.			GENERAL PURPOSES
CITY OF CHARLOTTESVILLE PARKS AND RECREATION - P. O. BOX 911 - CHARLOTTESVILLE, VA 22902	54-6001202	GOV	100,000.	0.			SKATE PARK LIGHTS

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CITY OF HOPE C/O RUTH BOLAN DUARTE, CA 91010	95-3435919	501(C)(3)	50,000.	0.			THE CHIP HOOPER MEMORIAL FUND IN HONOR OF CORAN CAPSHAW'S "SPIRIT OF LIFE" CAMPAIGN
CITY OF PROMISE P.O. BOX 5628 CHARLOTTESVILLE, VA 22905	83-1439722	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
CITY OF PROMISE P.O. BOX 5628 CHARLOTTESVILLE, VA 22905	83-1439722	501(C)(3)	100,000.	0.			GENERAL PURPOSES
CITY SCHOOLYARD GARDEN P. O. BOX 5282 CHARLOTTESVILLE, VA 22905	27-5103914	501(C)(3)	110,000.	0.			TO IMPROVE FOOD SECURITY AND HEALTH OUTCOMES FOR CHARLOTTESVILLE YOUTH
COLLEGE FOUNDATION OF THE UNIVERSITY OF VIRGINIA - THE RELIGION, RACE & DEMOCRACY LAB - CHARLOTTESVILLE, VA 22904	54-2009312	501(C)(3)	25,000.	0.			A SERIES OF DOCUMENTARIES TO BE MADE BY FIRST GENERATION STUDENTS,
COLLEGE FOUNDATION OF THE UNIVERSITY OF VIRGINIA - 2410 OLD IVY ROAD, SUITE 100 - CHARLOTTESVILLE, VA 22904	54-2009312	501(C)(3)	500,000.	0.			SUPPORTING THE COLLEGE AND GRADUATE SCHOOL OF ARTS & SCIENCES
COLLEGE FOUNDATION OF THE UNIVERSITY OF VIRGINIA - 2410 OLD IVY ROAD, SUITE 100 - CHARLOTTESVILLE, VA 22904	54-2009312	501(C)(3)	25,000.	0.			THE ASL PROGRAM ; THE ARTS COUNCIL ;AND THE ANNUAL FUND
COLLEGIATE SCHOOL ATTN: DIRECTOR OF ANNUAL GIVING RICHMOND, VA 23229	54-0528203	501(C)(3)	15,000.	0.			LEWIS & CLARK PAVILLION
COLUMBIA UNIVERSITY 622 WEST 113TH STREET NEW YORK, NY 10025	13-5598093	501(C)(3)	1,000,000.	0.			GENERAL PURPOSES

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMON GROUND HEALING ARTS 233 4TH ST NW, SUITE 219 CHARLOTTESVILLE, VA 22903	27-2111863	501(C)(3)	7,500.	0.			2021 ENRICHING COMMUNITIES GRANT
COMMON GROUND HEALING ARTS 233 4TH ST NW, SUITE 219 CHARLOTTESVILLE, VA 22903	27-2111863	501(C)(3)	7,500.	0.			BAMAWORKS 2021 GRANT
COMMUNITY CLIMATE COLLABORATIVE 415 8TH ST. NE CHARLOTTESVILLE, VA 22902	83-2065573	501(C)(3)	7,000.	0.			2021 ENRICHING COMMUNITIES GRANT
COMMUNITY CLIMATE COLLABORATIVE 415 8TH ST. NE CHARLOTTESVILLE, VA 22902	83-2065573	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
COMMUNITY CLIMATE COLLABORATIVE 415 8TH ST. NE CHARLOTTESVILLE, VA 22902	83-2065573	501(C)(3)	105,000.	0.			GENERAL PURPOSES
COMMUNITY FOUNDATION FOR A GREATER RICHMOND - 3409 MOORE STREET - RICHMOND, VA 23230	23-7009135	501(C)(3)	200,000.	0.			COMMUNITY FOUNDATION GIFT
COMMUNITY INVESTMENT COLLABORATIVE PO BOX 2976 CHARLOTTESVILLE, VA 22902-2976	45-4105820	501(C)(3)	10,000.	0.			2021 ENRICHING COMMUNITIES GRANT
COMMUNITY INVESTMENT COLLABORATIVE PO BOX 2976 CHARLOTTESVILLE, VA 22902-2976	45-4105820	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
COMPUTERS4KIDS 945 SECOND STREET, SE CHARLOTTESVILLE, VA 22902	54-1996936	501(C)(3)	7,000.	0.			2021 ENRICHING COMMUNITIES GRANT

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COMPUTERS4KIDS 945 SECOND STREET, SE CHARLOTTESVILLE, VA 22902	54-1996936	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
COMPUTERS4KIDS 945 SECOND STREET, SE CHARLOTTESVILLE, VA 22902	54-1996936	501(C)(3)	15,000.	0.			GENERAL PURPOSES
COMPUTERS4KIDS 945 SECOND STREET, SE CHARLOTTESVILLE, VA 22902	54-1996936	501(C)(3)	10,000.	0.			RENOVATION PROJECT
CONGREGATION BETH ISRAEL P. O. BOX 320 CHARLOTTESVILLE, VA 22902	51-0210891	501(C)(3)	7,475.	0.			GENERAL PURPOSES
CONGREGATION BETH ISRAEL P. O. BOX 320 CHARLOTTESVILLE, VA 22902	51-0210891	501(C)(3)	6,000.	0.			RELIGIOUS ACTIVITIES
CONNECTIONS MENTOR INC. PO BOX 361 NEW YORK, NY 10033	84-3747403	501(C)(3)	250,000.	0.			GENERAL PURPOSES
CONSCIOUS CAPITALIST GROUP FOUNDATION INC - PO BOX 2242 - CHARLOTTESVILLE, VA 22902	84-2733195	501(C)(3)	8,000.	0.			BAMAWORKS 2021 GRANT
CONSERVATIVES FOR CLEAN ENERGY INC. - 514 DANIELS STREET, SUITE 197 - RALEIGH, NC 27605	47-1213186	501(C)(3)	25,000.	0.			OPERATING GRANT
CORNELL UNIVERSITY P. O. BOX 6738 ITHACA, NY 14851-6738	15-0532082	501(C)(3)	7,000.	0.			ARTS & SCIENCE , ENGINEERING, JOHNSON SCHOOL OF BUSINESS FOR THESE SPORTS PROGRAMS:

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COUNTY OF ALBEMARLE 401 MCINTIRE ROAD CHARLOTTESVILLE, VA 22902	54-6001102	GOV	115,000.	0.			TO FUND A DEDICATED FULL-TIME PROGRAM COORDINATOR FOR THE YANCEY SCHOOL COMMUNITY
CRECIENDO JUNTOS 1740 BROADWAY ST., BOX 11 CHARLOTTESVILLE, VA 22902	47-2806836	501(C)(3)	15,000.	0.			2021 ENRICHING COMMUNITIES GRANT
CULTIVATE CHARLOTTESVILLE PO BOX 5282 CHARLOTTESVILLE, VA 22905	27-5103914	501(C)(3)	10,000.	0.			2021 ENRICHING COMMUNITIES GRANT
CULTIVATE CHARLOTTESVILLE PO BOX 5282 CHARLOTTESVILLE, VA 22905	27-5103914	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
CULTIVATE CHARLOTTESVILLE PO BOX 5282 CHARLOTTESVILLE, VA 22905	27-5103914	501(C)(3)	40,000.	0.			GENERAL PURPOSES
CULTIVATE CHARLOTTESVILLE PO BOX 5282 CHARLOTTESVILLE, VA 22905	27-5103914	501(C)(3)	15,000.	0.			SUPPORTING SCHOOL GARDENS AND YOUTH LEADERSHIP TRAINING FOR 2500 YOUTH & 500 ADULTS
CULTIVATE CHARLOTTESVILLE PO BOX 5282 CHARLOTTESVILLE, VA 22905	27-5103914	501(C)(3)	54,000.	0.			THE HEALTHY SCHOOL FUND INITIATIVE
CVILLE IMMIGRANT FREEDOM FUND PO BOX 7881 CHARLOTTESVILLE, VA 22906	83-1201014	501(C)(3)	7,500.	0.			FACILITATING JUSTICE FOR IMMIGRANTS AND ASYLUM SEEKERS
DEPAUL COMMUNITY RESOURCES 5650 HOLLINS ROAD ROANOKE, VA 24019	54-1108079	501(C)(3)	6,000.	0.			2021 BAMA WORKS GRANT

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DOGS DESERVE BETTER, INC. - BLUE RIDGE CHAPTER - P.O. BOX 7961 - CHARLOTTESVILLE, VA 22906	03-0480223	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
DOLLYWOOD FOUNDATION 111 DOLLYWOOD LANE PIGEON FORGE, TN 37863	62-1348105	501(C)(3)	9,000.	0.			IMAGINATION LIBRARY ON BEHALF OF THE CHARLOTTESVILLE ROTARY CLUB
DOLLYWOOD FOUNDATION 111 DOLLYWOOD LANE PIGEON FORGE, TN 37863	62-1348105	501(C)(3)	20,071.	0.			SUPPORT OF THE IMAGINATION LIBRARY PROGRAM
DOWNTOWN GREENS INC 206 CHARLES ST. FREDERICKSBURG, VA 22401	54-1853889	501(C)(3)	15,000.	0.			GENERAL OPERATING OR LAND EXPANSION AS NEEDED
ELEVATE EARLY EDUCATION 12 SOUTH THIRD STREET RICHMOND, VA 23219	30-0759825	501(C)(3)	50,000.	0.			GENERAL PURPOSES
ELK HILL FARM 1975 ELK HILL ROAD GOOCHLAND, VA 23063	23-7071154	501(C)(3)	8,500.	0.			2021 BAMA WORKS GRANT
ELK HILL FARM P. O. BOX 99 GOOCHLAND, VA 23063	23-7071154	501(C)(3)	10,000.	0.			EXPANDING THE THERAPEUTIC WILDERNESS EXPLORATION "ECO-ADVENTURE" PROGRAM IN CHARLOTTESVILLE
ELK HILL FARM P. O. BOX 99 GOOCHLAND, VA 23063	23-7071154	501(C)(3)	10,000.	0.			GENERAL PURPOSES
EMMANUEL CHURCH ATTN: SANDY VON THELEN, GENERAL FUN GREENWOOD, VA 22943		CHURCH	19,000.	0.			SUPPORT OF GENERAL OPERATING NEEDS

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EMMANUEL EPISCOPAL CHURCH PO BOX 38 GREENWOOD, VA 22943		CHURCH	13,000.	0.			ANNUAL SUPPORT
EMPOWERED PLAYERS 9 PINEKNOLL CIR PALMYRA, VA 22963	82-2200734	501(C)(3)	9,000.	0.			2021 ENRICHING COMMUNITIES GRANT
EQUAL JUSTICE INITIATIVE 122 COMMERCE STREET MONTGOMERY, AL 36104	63-1135091	501(C)(3)	25,000.	0.			SUPPORT OF IMPLEMENTATION OF EJI'S ANNUAL PLAN
EVANGELICAL LUTHERAN CHURCH IN AMERICA - P.O. BOX 1809 - MERRIFIELD, VA 22116	41-1568278	501(C)(3)	35,000.	0.			LUTHERAN DISASTER RESPONSE AND ELCA WORLD HUNGER
FARMINGDALE WRESTLING ALUMNI INC. PO BOX 753 FARMINGDALE, NY 11735	11-3636098	501(C)(3)	25,000.	0.			GENERAL PURPOSES
FEEDING GREENE, INC. P.O BOX 13 STANARDSVILLE, VA 22973	27-4637486	501(C)(3)	7,000.	0.			2021 ENRICHING COMMUNITIES GRANT
FEEDING GREENE, INC. 81 MAIN STREET STANARDSVILLE, VA 22973	27-4637486	501(C)(3)	6,500.	0.			BAMAWORKS 2021 GRANT
FEEDING GREENE, INC. 81 MAIN STREET STANARDSVILLE, VA 22973	27-4637486	501(C)(3)	15,000.	0.			GENERAL PURPOSES
FEEDING GREENE, INC. 81 MAIN STREET STANARDSVILLE, VA 22973	27-4637486	501(C)(3)	25,000.	0.			SKYLINE CAP COVID RELIEF GRANT PROGRAM

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FLUVANNA COUNTY HABITAT FOR HUMANITY - 105 CROFTON PLAZA, SUITE 9 - PALMYRA, VA 22963-4821	54-1640558	501(C)(3)	10,000.	0.			2021 ENRICHING COMMUNITIES GRANT
FLUVANNA COUNTY HABITAT FOR HUMANITY - 105 CROFTON PLAZA, SUITE 9 - PALMYRA, VA 22963-4821	54-1640558	501(C)(3)	8,000.	0.			BAMAWORKS 2021 GRANT
FLUVANNA COUNTY PUBLIC SCHOOLS 14455 JAMES MADISON HIGHWAY PALMYRA, VA 22963-4136	54-6025086	501(C)(3)	7,000.	0.			2021 ENRICHING COMMUNITIES GRANT
FLUVANNA COUNTY PUBLIC SCHOOLS 14455 JAMES MADISON HIGHWAY PALMYRA, VA 22963-4136	54-6025086	501(C)(3)	7,000.	0.			BAMAWORKS 2021 GRANT
FLUVANNA MEALS ON WHEELS 105 CROFTON PLAZA, SUITE 8 PALMYRA, VA 22963	26-0185272	501(C)(3)	10,000.	0.			2021 ENRICHING COMMUNITIES GRANT
FLUVANNA MEALS ON WHEELS 105 CROFTON PLAZA, SUITE 8 PALMYRA, VA 22963	26-0185272	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
FLUVANNA MEALS ON WHEELS 105 CROFTON PLAZA, SUITE 8 PALMYRA, VA 22963	26-0185272	501(C)(3)	38,000.	0.			GENERAL PURPOSES
FLUVANNA/LOUISA HOUSING FOUNDATION P.O. BOX 160 LOUISA, VA 23093	54-1518967	501(C)(3)	8,000.	0.			BAMAWORKS 2021 GRANT
FOCUSED ULTRASOUND FOUNDATION 1230 CEDARS COURT, SUITE F CHARLOTTESVILLE, VA 22903	20-5744808	501(C)(3)	1,015,000.	0.			GENERAL PURPOSES

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FOOTHILLS CHILD ADVOCACY CENTER 1106 EAST HIGH ST., SUITE 100 CHARLOTTESVILLE, VA 22902	20-5182316	501(C)(3)	8,000.	0.			BAMAWORKS 2021 GRANT
FOOTHILLS HOUSING CORP 47 GARRETT STREET, SUITE 205 WARRENTON, VA 20186	62-1458881	501(C)(3)	7,000.	0.			BAMAWORKS 2021 GRANT
FRIENDS OF ACADIA P. O. BOX 45 BAR HARBOR, ME 04609	01-0425071	501(C)(3)	10,000.	0.			SUPPORTING ACADIA NATIONAL PARK EDUCATIONAL AND NATURE UNDERTAKINGS
FRIENDS OF BRILAND AID INC 6 CLIFFDALE RD. GREENWICH, CT 06831	85-0983203	501(C)(3)	25,000.	0.			GENERAL PURPOSES
FRIENDS OF BRILAND AID INC 6 CLIFFDALE RD. GREENWICH, CT 06831	85-0983203	501(C)(3)	25,000.	0.			GENERAL PURPOSES
FRIENDS OF JEFFERSON-MADISON REGIONAL LIBRARY - 1500 GORDON AVENUE - CHARLOTTESVILLE, VA 22903	54-0834830	501(C)(3)	10,000.	0.			BOOKS BEHIND BARS
FRIENDS OF MOMENTUM BIKE CLUBS 225 SOUTH PLEASANTBURG DRIVE GREENVILLE, SC 29607	47-1777235	501(C)(3)	100,000.	0.			PROGRAM SUPPORT
FRONT PORCH CVILLE 221 WATER ST. E CHARLOTTESVILLE, VA 22902	47-4040467	501(C)(3)	8,500.	0.			BAMAWORKS 2021 GRANT
FRONT PORCH CVILLE 221 WATER ST. E CHARLOTTESVILLE, VA 22902	47-4040467	501(C)(3)	15,000.	0.			GENERAL PURPOSES

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FRONT PORCH CVILLE 221 WATER ST. E CHARLOTTESVILLE, VA 22902	47-4040467	501(C)(3)	25,000.	0.			SUPPORTING THE ROOTS AND WINGS PROGRAM
GARTH ROAD PRESERVATION 4626 SLAM GATE RD CROZET, VA 22932	81-5011713	501(C)(3)	10,000.	0.			FOXFIELD RACING
GASP 2320 HIGHLAND AVENUE S STE 270 BIRMINGHAM, AL 35205	27-0354485	501(C)(3)	10,000.	0.			GENERAL PURPOSES
GEORGIA CONSERVATION VOTERS EDUCATION FUND - 725 PONCE DE LEON AVE, FLOOR 2 - ATLANTA, GA 30306	58-2559965	501(C)(3)	10,000.	0.			GENERAL PURPOSES
GEORGIA INTERFAITH POWER AND LIGHT 701 S. COLUMBIA DR. DECATUR, GA 30030	26-3446212	501(C)(3)	10,000.	0.			GENERAL PURPOSES
GEORGIA'S FRIENDS 405 RIDGE STREET CHARLOTTESVILLE, VA 22902	26-3473764	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
GEORGIA'S FRIENDS 405 RIDGE STREET CHARLOTTESVILLE, VA 22902	26-3473764	501(C)(3)	15,000.	0.			GENERAL PURPOSES
GEORGIA'S FRIENDS 405 RIDGE STREET CHARLOTTESVILLE, VA 22902	26-3473764	501(C)(3)	24,000.	0.			PAYING DOWN THE REMAINDER OF THEIR MORTGAGE
GIVING WORDS INC PO BOX 1211 LOUISA, VA 23093	82-3581429	501(C)(3)	7,000.	0.			BAMAWORKS 2021 GRANT

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GOOCHLANDCARES INC 2999 RIVER ROAD WEST GOOCHLAND, VA 23063	54-1967650	501(C)(3)	70,000.	0.			GENERAL PURPOSES
GOOCHLANDCARES INC 2999 RIVER ROAD WEST GOOCHLAND, VA 23063	54-1967650	501(C)(3)	15,000.	0.			GENERAL PURPOSES AND/OR CLIENT MEALS AT THE DISCRETION OF THE EXECUTIVE DIRECTOR
GOOCHLANDCARES INC 2999 RIVER ROAD WEST GOOCHLAND, VA 23063	54-1967650	501(C)(3)	10,000.	0.			MATCHING FUNDRAISING CHALLENGE
GOOCHLANDCARES INC 2999 RIVER ROAD WEST GOOCHLAND, VA 23063	54-1967650	501(C)(3)	5,250.	0.			THE VCU DA VINCI CENTER DESIGN THINKING WORKSHOP
GRACE CHURCH RED HILL 960 MONACAN TRAIL RD. CHARLOTTESVILLE, VA 22902		CHURCH	25,000.	0.			CAPITAL CAMPAIGN/IMPROVEMENTS TO FELLOWSHIP HALL
GREAT ASPIRATIONS SCHOLARSHIP PROGRAM, INC. (GRASP) - 2821 EMERYWOOD PARKWAY - RICHMOND, VA 23294	52-1277427	501(C)(3)	7,000.	0.			2021 BAMA WORKS GRANT
GREATER CINCINNATI/OHIO RIVER VALLEY CHAPTER AMERICAN RED CROSS - 2111 DANA AVE. - CINCINNATI, OH 45207	53-0196605	501(C)(3)	10,000.	0.			YOUTH LEADERSHIP PROGRAM SUPPORT AND DAVID POLLAK AWARD
GREENE ALLIANCE OF CHURCH COMMUNITY EFFORTS (G.R.A.C.E.) - P. O. BOX 513 - STANARDSVILLE, VA 22973-0513	20-2947457	501(C)(3)	23,000.	0.			SKYLINE CAP COVID RELIEF GRANT
GREENE CARE CLINIC P. O. BOX 54 STANARDSVILLE, VA 22973-0054	72-1602744	501(C)(3)	6,000.	0.			BAMAWORKS 2021 GRANT

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GREENE CARE CLINIC P. O. BOX 54 STANARDSVILLE, VA 22973-0054	72-1602744	501(C)(3)	15,400.	0.			SKYLINE CAP COVID RELIEF GRANT
GUILFORD COLLEGE OFFICE OF STUDENT ACCOUNTS GREENSBORO, NC 27419	56-0529982	501(C)(3)	25,000.	0.			GENERAL PURPOSES
HABITAT FOR HUMANITY OF GREATER CHARLOTTESVILLE - 967 2ND ST. SE - CHARLOTTESVILLE, VA 22902	91-1914868	501(C)(3)	7,000.	0.			2021 ENRICHING COMMUNITIES GRANT
HABITAT FOR HUMANITY OF GREATER CHARLOTTESVILLE - 967 2ND ST. SE - CHARLOTTESVILLE, VA 22902	91-1914868	501(C)(3)	7,500.	0.			2021 LOUISA CO COMM FUND GRANT
HABITAT FOR HUMANITY OF GREATER CHARLOTTESVILLE - 967 2ND ST. SE - CHARLOTTESVILLE, VA 22902	91-1914868	501(C)(3)	7,500.	0.			BAMAWORKS 2021 GRANT
HABITAT FOR HUMANITY OF GREATER CHARLOTTESVILLE - 967 2ND ST. SE - CHARLOTTESVILLE, VA 22902	91-1914868	501(C)(3)	46,000.	0.			GENERAL PURPOSES
HAYGROUND SCHOOL, INC. P.O. BOX 1827 BRIDGEHAMPTON, NY 11932	11-3365670	501(C)(3)	10,000.	0.			SCHOLARSHIP
HEAD COUNT 104 W. 29TH STREET NEW YORK, NY 10001	77-0626772	501(C)(3)	65,000.	0.			GENERAL PURPOSES
HEARTLAND HORSE HEROES 16680 W JAMES ANDERSON HWY BUCKINGHAM, VA 23921	54-2037302	501(C)(3)	7,500.	0.			BAMAWORKS 2021 GRANT

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HERITAGE CENTER FOOD PANTRY P.O. BOX 281 ROSELAND, VA 22967	83-3197557	501(C)(3)	6,000.	0.			BAMAWORKS 2021 GRANT
HOLIDAY LAKE 4-H EDUCATIONAL CENTER - 1267 4H CAMP RD. - APPOMATTOX, VA 24522	54-6003131	501(C)(3)	10,000.	0.			SUPPORTING CAMP SCHOLARSHIPS
HOLY TEMPLE CHURCH OF GOD IN CHRIST - 212 ROSSER AVE - CHARLOTTESVILLE, VA 22903-2243, VA 22903	71-0862944	501(C)(3)	6,000.	0.			BAMAWORKS 2021 GRANT
HOPE'S LEGACY EQUINE RESCUE CENTER 5145 TAYLOR CREEK ROAD AFTON, VA 22920	80-0273321	501(C)(3)	10,000.	0.			GENERAL PURPOSES
HOPE'S LEGACY EQUINE RESCUE CENTER 5145 TAYLOR CREEK ROAD AFTON, VA 22920	80-0273321	501(C)(3)	82,000.	0.			NEW PASTURES AT CASTLE ROCK
HORSES AS HEALERS, INC. 218 KNOLE FARM LANE CHARLOTTESVILLE, VA 22901	52-2377190	501(C)(3)	8,500.	0.			BAMAWORKS 2021 GRANT
HOSPICE OF THE PIEDMONT 675 PETER JEFFERSON PARKWAY, SUITE CHARLOTTESVILLE, VA 22911	52-1205921	501(C)(3)	26,750.	0.			ANNUAL PAYOUT
HOSPICE OF THE PIEDMONT 675 PETER JEFFERSON PARKWAY, SUITE CHARLOTTESVILLE, VA 22911	52-1205921	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
HOSPICE OF THE PIEDMONT 675 PETER JEFFERSON PARKWAY, SUITE CHARLOTTESVILLE, VA 22911	52-1205921	501(C)(3)	24,316.	0.			GENERAL PURPOSES

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HURON MOUNTAIN WILDLIFE FOUNDATION 71 LINKS RD. HOBE SOUND, FL 33455	36-6108341	501(C)(3)	15,000.	0.			GENERAL PURPOSES
IMPACT (INTERFAITH MOVEMENT FOR PROMOTING ACTION BY CONGREGATIONS TOGETHER) - 1700 UNIVERSITY AVENUE - CHARLOTTESVILLE, VA 22903	20-4579031	501(C)(3)	7,500.	0.			BAMAWORKS 2021 GRANT
INNOCENCE PROJECT INC. 40 WORTH STREET, SUITE 701 NEW YORK, NY 10013	32-0077563	501(C)(3)	33,333.	0.			GENERAL PURPOSES
INTERNATIONAL NEIGHBORS 2949 RIGGORY RIDGE RD. CHARLOTTESVILLE, VA 22911	47-4084246	501(C)(3)	6,000.	0.			THE AREA OF GREATEST COMMUNITY NEED
INTERNATIONAL RESCUE COMMITTEE 609 EAST MARKET STREET, SUITE 104 CHARLOTTESVILLE, VA 22902	13-5660870	501(C)(3)	5,500.	0.			BAMAWORKS 2021 GRANT
INTERNATIONAL RESCUE COMMITTEE 609 EAST MARKET STREET, SUITE 104 CHARLOTTESVILLE, VA 22902	13-5660870	501(C)(3)	10,000.	0.			NEW ROOTS COMMUNITY WELLNESS GARDENS TO SUPPORT & EXPAND IRC-MANAGED COMMUNITY
INTERNATIONAL RESCUE COMMITTEE 609 EAST MARKET STREET, SUITE 104 CHARLOTTESVILLE, VA 22902	13-5660870	501(C)(3)	26,000.	0.			NEW ROOTS; GENERAL PURPOSES
JAMES RIVER ASSOCIATION 211 ROCKETTS WAY #200 RICHMOND, VA 23231	51-0211913	501(C)(3)	15,000.	0.			SUPPORTING RIVER RATS AND OTHER PROGRAMS
JEFFERSON AREA BOARD FOR AGING INC. - 674 HILLSDALE DRIVE, SUITE 9 - CHARLOTTESVILLE, VA 22901	54-0990078	501(C)(3)	6,000.	0.			BAMAWORKS 2021 GRANT

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JEFFERSON AREA BOARD FOR AGING INC. - 674 HILLSDALE DRIVE, SUITE 9 - CHARLOTTESVILLE, VA 22901	54-0990078	501(C)(3)	11,250.	0.			CHRONIC DISEASE SELF-MANAGEMENT PROJECT
JEFFERSON AREA BOARD FOR AGING INC. - 674 HILLSDALE DRIVE, SUITE 9 - CHARLOTTESVILLE, VA 22901	54-0990078	501(C)(3)	12,500.	0.			GENERAL PURPOSES
JEFFERSON SCHOOL AFRICAN-AMERICAN HERITAGE CENTER - 233 4TH ST. NW - CHARLOTTESVILLE, VA 22903	47-5411481	501(C)(3)	10,000.	0.			2021 BAMA WORKS GRANT
JEFFERSON SCHOOL FOUNDATION 233 4TH ST., NW CHARLOTTESVILLE, VA 22903	20-0598073	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
KINDNESS CAFE + PLAY 151 MCINTIRE PARK DRIVE CHARLOTTESVILLE, VA 22902	83-3729731	501(C)(3)	10,000.	0.			GENERAL PURPOSES
KIRCHNER IMPACT FOUNDATION 2500 WOODCREST PL. BIRMINGHAM, AL 35209	47-2825936	501(C)(3)	120,000.	0.			PROGRAM SUPPORT
LAFAYETTE SCHOOL 103 ZION STATION ROAD TROY, VA 22974	31-1664802	501(C)(3)	8,000.	0.			BAMAWORKS 2021 GRANT
LAKE WASHINGTON GIRLS MIDDLE SCHOOL - P.O. BOX 24506 - SEATTLE, WA 98124-0506	91-1835055	501(C)(3)	35,000.	0.			SPRING FOR L-DUB
LEGAL AID JUSTICE CENTER 1000 PRESTON AVENUE, SUITE A CHARLOTTESVILLE, VA 22903	54-0884513	501(C)(3)	142,505.	0.			GENERAL PURPOSES

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LEGAL AID JUSTICE CENTER 1000 PRESTON AVENUE, SUITE A CHARLOTTESVILLE, VA 22903	54-0884513	501(C)(3)	25,000.	0.			STRATEGIC PLAN IMPLEMENTATION
LEWIS AND CLARK EXPLORATORY CENTER OF VIRGINIA - P. O. BOX 281 - CHARLOTTESVILLE, VA 22902	54-2014680	501(C)(3)	10,000.	0.			GENERAL PURPOSES
LIGHT HOUSE STUDIO 121 EAST WATER STREET CHARLOTTESVILLE, VA 22902	54-2033510	501(C)(3)	15,000.	0.			GENERAL PURPOSES
LIGHT HOUSE STUDIO 121 EAST WATER STREET CHARLOTTESVILLE, VA 22902	54-2033510	501(C)(3)	10,000.	0.			PSA PROJECT
LITERACY VOLUNTEERS OF AMERICA-CHARLOTTESVILLE/ALBEMARLE - 233 FOURTH ST., NW - CHARLOTTESVILLE, VA 22903	35-2220618	501(C)(3)	7,000.	0.			BAMAWORKS 2021 GRANT
LIVE ARTS P. O. BOX 1231 CHARLOTTESVILLE, VA 22902	54-1527799	501(C)(3)	10,000.	0.			2021 ENRICHING COMMUNITIES GRANT
LIVE ARTS P. O. BOX 1231 CHARLOTTESVILLE, VA 22902	54-1527799	501(C)(3)	10,000.	0.			GENERAL PURPOSES
LOAVES & FISHES FOOD PANTRY INC. 2050 LAMBS RD. CHARLOTTESVILLE, VA 22901	45-1498743	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
LOAVES & FISHES FOOD PANTRY INC. 2050 LAMBS RD. CHARLOTTESVILLE, VA 22901	45-1498743	501(C)(3)	135,000.	0.			GENERAL PURPOSES

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LOCAL ENERGY ALLIANCE PROGRAM 608 RIDGE STREET CHARLOTTESVILLE, VA 22902	27-1155142	501(C)(3)	100,000.	0.			LEAP'S LOW-INCOME WEATHERIZATION PROGRAM
LOCAL FOOD HUB P. O. BOX 4647 CHARLOTTESVILLE, VA 22905-4647	26-4137130	501(C)(3)	12,000.	0.			2021 ENRICHING COMMUNITIES GRANT
LOCAL FOOD HUB P. O. BOX 4647 CHARLOTTESVILLE, VA 22905-4647	26-4137130	501(C)(3)	6,500.	0.			BAMAWORKS 2021 GRANT
LONGWOOD UNIVERSITY FOUNDATION INC 130 LANCASTER FARMVILLE, VA 23909	54-6047289	501(C)(3)	30,000.	0.			INITIAL FUNDING FOR THE ELIZABETH REBECCA ROBERTSON JOHNSON/FRANCES BLAND ROBERTSON FIVEASH
LONGWOOD UNIVERSITY FOUNDATION INC 130 LANCASTER FARMVILLE, VA 23909	54-6047289	501(C)(3)	63,500.	0.			NURSING SCHOOL SIMMAN ESSENTIAL MANAKIN
LOUISA COMMUNITY EMERGENCY FUND PO BOX 295 LOUISA, VA 23093	47-4102293	501(C)(3)	5,865.	0.			2021 LOUISA CO COMM FUND GRANT
LOUISA COUNTY HISTORICAL SOCIETY P.O. BOX 1172 LOUISA, VA 23093	23-7058587	501(C)(3)	6,600.	0.			2021 LOUISA CO COMM FUND GRANT
LOUISA COUNTY RESOURCE COUNCIL PO BOX 52 LOUISA, VA 23093	54-1648752	501(C)(3)	12,000.	0.			2021 ENRICHING COMMUNITIES GRANT
LOUISA COUNTY RESOURCE COUNCIL PO BOX 52 LOUISA, VA 23093	54-1648752	501(C)(3)	7,000.	0.			2021 LOUISA CO COMM FUND GRANT

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LOUISA COUNTY RESOURCE COUNCIL PO BOX 52 LOUISA, VA 23093	54-1648752	501(C)(3)	7,500.	0.			BAMAWORKS 2021 GRANT
LOUISA COUNTY RESOURCE COUNCIL PO BOX 52 LOUISA, VA 23093	54-1648752	501(C)(3)	6,750.	0.			CARING CONNECTIONS
LOUISA COUNTY RESOURCE COUNCIL PO BOX 52 LOUISA, VA 23093	54-1648752	501(C)(3)	21,000.	0.			GENERAL PURPOSES
LOUISA DOWNTOWN DEVELOPMENT CORPORATION - PO BOX 2119 - LOUISA, VA 23093	54-2148881	501(C)(3)	8,500.	0.			2021 BAMA WORKS GRANT
LOUISA DOWNTOWN DEVELOPMENT CORPORATION - PO BOX 2119 - LOUISA, VA 23093	54-2148881	501(C)(3)	10,000.	0.			2021 ENRICHING COMMUNITIES GRANT
LOUISA DOWNTOWN DEVELOPMENT CORPORATION - PO BOX 2119 - LOUISA, VA 23093	54-2148881	501(C)(3)	8,000.	0.			2021 LOUISA CO COMM FUND GRANT
LOVE INC (IN THE NAME OF CHRIST) 198 SPOTNAP ROAD, SUITE C-1 CHARLOTTESVILLE, VA 22911	54-1529492	501(C)(3)	10,000.	0.			GENERAL PURPOSES
LOVE NO EGO FOUNDATION, INC P.O. BOX 7134 CHARLOTTESVILLE, VA 22906	83-0809136	501(C)(3)	8,000.	0.			2021 ENRICHING COMMUNITIES GRANT
LOVE OUTREACH FOOD PANTRY P.O. BOX 85 ORANGE, VA 22960	54-1475154	501(C)(3)	25,000.	0.			SKYLINE CAP COVID RELIEF GRANT

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LUPUS RESEARCH ALLIANCE 757 THIRD AVE., 20TH FLOOR NEW YORK, NY 10017	58-2492929	501(C)(3)	20,000.	0.			GENERAL PURPOSES
MAKE A WISH FOUNDATION OF GREATER VIRGINIA - 2810 N. PARHAM ROAD, SUITE 302 - RICHMOND, VA 23294	54-1429614	501(C)(3)	10,000.	0.			2021 BAMA WORKS GRANT
MARINE TOYS FOR TOTS FOUNDATION C/O ANGIE JEFFERSON CHARLOTTESVILLE, VA 22905	20-3021444	501(C)(3)	10,000.	0.			GENERAL SUPPORT
MARY BALDWIN UNIVERSITY UNIVERSITY ADVANCEMENT STAUNTON, VA 24402	54-0506319	501(C)(3)	50,000.	0.			GENERAL PURPOSES
MAYO CLINIC FLORIDA DEPARTMENT OF DEVELOPMENT ROCHESTER, MN 55905	59-0714831	501(C)(3)	10,000.	0.			FOR GENERAL SUPPORT OF THE JACKSONVILLE, FL LOCATION
MCILHANY PARISH 960 MONACAN TRAIL ROAD CHARLOTTESVILLE, VA 22902		CHURCH	10,000.	0.			THE CAPITAL CAMPAIGN AT THE ATTENTION OF REBEKAH MENNING
MCLEAN HOSPITAL CORPORATION 115 MILL ST. BELMONT, MA 02478	04-2697981	501(C)(3)	176,088.	0.			FUNDING THE EXECUTIVE DIRECTOR'S SALARY
MEALS ON WHEELS OF CHARLOTTESVILLE-ALBEMARLE - 704 ROSE HILL DRIVE - CHARLOTTESVILLE, VA 22903	54-1061454	501(C)(3)	10,000.	0.			2021 ENRICHING COMMUNITIES GRANT
MEALS ON WHEELS OF CHARLOTTESVILLE-ALBEMARLE - 704 ROSE HILL DRIVE - CHARLOTTESVILLE, VA 22903	54-1061454	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT

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MEALS ON WHEELS OF CHARLOTTESVILLE-ALBEMARLE - 704 ROSE HILL DRIVE - CHARLOTTESVILLE, VA 22903	54-1061454	501(C)(3)	26,000.	0.			GENERAL PURPOSES
MEDIATION CENTER OF CHARLOTTESVILLE - P.O. BOX 133 - CHARLOTTESVILLE, VA 22902	20-0199872	501(C)(3)	6,000.	0.			BAMAWORKS 2021 GRANT
MEDICAL COLLEGE OF VIRGINIA FOUNDATION - PO BOX 980567 - RICHMOND, VA 23298-0234	54-6053660	501(C)(3)	12,500.	0.			VCU SCHOOL OF NURSING WAR HEROES INITIATIVE ENDOWMENT
MEDICAL COLLEGE OF VIRGINIA FOUNDATION - PO BOX 980567 - RICHMOND, VA 23298-0234	54-6053660	501(C)(3)	12,500.	0.			VCU SCHOOL OF NURSING LOIS PARKER HENLEY ENDOWED MERIT SCHOLARSHIP
MILLENNIUM GROUP PO BOX 23 LOVINGSTON, VA 24581	20-0179105	501(C)(3)	8,000.	0.			2021 ENRICHING COMMUNITIES GRANT
MILLER SCHOOL OF ALBEMARLE 1000 SAMUEL MILLER LOOP CHARLOTTESVILLE, VA 22903	54-0515717	501(C)(3)	28,131.	0.			A 7-DAY BOARDER SCHOLARSHIP, TUITION, AND BOOKS
MILLER SCHOOL OF ALBEMARLE 1000 SAMUEL MILLER LOOP CHARLOTTESVILLE, VA 22903	54-0515717	501(C)(3)	16,660.	0.			GENERAL PURPOSES
MILLER SCHOOL OF ALBEMARLE 1000 SAMUEL MILLER LOOP CHARLOTTESVILLE, VA 22903	54-0515717	501(C)(3)	6,708.	0.			THINGS NEEDED THAT ARE NOT IN THE BUDGET AND USED BY LIBRARIAN OR SCHOOL
MILLER SCHOOL OF ALBEMARLE 1000 SAMUEL MILLER LOOP CHARLOTTESVILLE, VA 22903	54-0515717	501(C)(3)	23,098.	0.			TUITION SUPPORT

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MIMA MUSIC 297 TURKEY RIDGE ROAD CHARLOTTESVILLE, VA 22903	06-1736291	501(C)(3)	7,000.	0.			2021 ENRICHING COMMUNITIES GRANT
MIMA MUSIC 297 TURKEY RIDGE ROAD CHARLOTTESVILLE, VA 22903	06-1736291	501(C)(3)	8,683.	0.			BAMAWORKS 2021 GRANT
MONTICELLO LITTLE LEAGUE 14873 SOUTH CONSTITUTION ROUTE SCOTTSVILLE, VA 24590	54-1287683	501(C)(3)	10,000.	0.			GENERAL PURPOSES
MONTPELIER FOUNDATION PO BOX 911 ORANGE, VA 22960	31-1620682	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
MONTPELIER FOUNDATION PO BOX 911 ORANGE, VA 22960	31-1620682	501(C)(3)	99,500.	0.			DEVELOPING A CURRICULUM AND DIALOGUE PARTNERSHIP ACPS TO HELP ADDRESS SYSTEMIC RACIAL
MOTHER'S OUT FRONT 30 BOW STREET CAMBRIDGE, MA 02138	46-5758600	501(C)(3)	50,000.	0.			OPERATING GRANT
MUSICIANS UNITED TO SERVE THE YOUTH OF CHARLOTTESVILLE - D/B/A MUSIC RESOURCE CENTER - CHARLOTTESVILLE, VA 22902	54-1678386	501(C)(3)	7,000.	0.			2021 ENRICHING COMMUNITIES GRANT
MUSICIANS UNITED TO SERVE THE YOUTH OF CHARLOTTESVILLE - D/B/A MUSIC RESOURCE CENTER - CHARLOTTESVILLE, VA 22902	54-1678386	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
NATIONAL NETWORK OF ABORTION FUNDS P.O. BOX 5082 CHARLOTTESVILLE, VA 22905	27-1343669	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT

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NATURE CONSERVANCY 4245 NORTH FAIRFAX DRIVE ARLINGTON, VA 22203	53-0242652	501(C)(3)	289,038.	0.			DMB PLANT A MILLION TREES INITIATIVE
NATURE CONSERVANCY 4245 NORTH FAIRFAX DRIVE ARLINGTON, VA 22203	53-0242652	501(C)(3)	100,000.	0.			THE HE'EIA OAHU FRESHWATER SYSTEM RESTORATION PROJECT,
NATURE CONSERVANCY 4245 NORTH FAIRFAX DRIVE ARLINGTON, VA 22203	53-0242652	501(C)(3)	33,334.	0.			THE SANDALWOOD RESTORATION PROJECT
NATURE CONSERVANCY - VIRGINIA CHAPTER - 652 PETER JEFFERSON PARKWAY - CHARLOTTESVILLE, VA 22911	53-0242652	501(C)(3)	15,000.	0.			GENERAL PURPOSES
NATURE CONSERVANCY - VIRGINIA CHAPTER - 652 PETER JEFFERSON PARKWAY - CHARLOTTESVILLE, VA 22911	53-0242652	501(C)(3)	110,000.	0.			UNRESTRICTED FOR SUPPORT OF VIRGINIA CONSERVATION ACTIVITIES
NATURE CONSERVANCY - VIRGINIA CHAPTER - 652 PETER JEFFERSON PARKWAY - CHARLOTTESVILLE, VA 22911	53-0242652	501(C)(3)	30,000.	0.			UNRESTRICTED FOR SUPPORT OF VIRGINIA CONSERVATION ACTIVITIES
NEIGHBORS IN NEED COMMUNITY SERVICES DBA NEIGHBORS IN NEED MINISTRIES - P.O. BOX 447 - RUCKERSVILLE, VA 22968	04-3660294	501(C)(3)	10,000.	0.			SKYLINE CAP COVID RELIEF GRANT
NELSON COMMUNITY WELLNESS ALLIANCE, INC - P.O. BOX 751 - LOVINGSTON, VA 22938	85-1231946	501(C)(3)	8,500.	0.			BAMAWORKS 2021 GRANT
NELSON COUNTY EDUCATION FOUNDATION 2305 DUTCH CREEK LANE SHIPMAN, VA 22971	54-1371868	501(C)(3)	15,000.	0.			ANNUAL MINI-GRANT PROGRAM FOR NELSON COUNTY PUBLIC SCHOOL TEACHERS

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NELSON COUNTY EDUCATION FOUNDATION 2305 DUTCH CREEK LANE SHIPMAN, VA 22971	54-1371868	501(C)(3)	87,000.	0.			PROGRAM SUPPORT
NEW BEGINNINGS CHRISTIAN COMMUNITY 1130 EAST MARKET ST, CHARLOTTESVILLE, VA 22902	54-2057721	501(C)(3)	6,000.	0.			2021 ENRICHING COMMUNITIES GRANT
NEW BEGINNINGS CHRISTIAN COMMUNITY 1130 EAST MARKET ST, CHARLOTTESVILLE, VA 22902	54-2057721	501(C)(3)	7,346.	0.			BAMAWORKS 2021 GRANT
NEW CITY ARTS INITIATIVE P. O. BOX 1293 CHARLOTTESVILLE, VA 22902	27-1865371	501(C)(3)	14,000.	0.			2021 ENRICHING COMMUNITIES GRANT
NEW CITY ARTS INITIATIVE P. O. BOX 1293 CHARLOTTESVILLE, VA 22902	27-1865371	501(C)(3)	5,275.	0.			BAMAWORKS 2021 GRANT
NEW CITY ARTS INITIATIVE P. O. BOX 1293 CHARLOTTESVILLE, VA 22902	27-1865371	501(C)(3)	50,000.	0.			CAPACITY BUILDING
NEW HILL DEVELOPMENT CORPORATION 401 E. MARKET ST, SUITE 14 CHARLOTTESVILLE, VA 22902	83-1107639	501(C)(3)	10,000.	0.			2021 ENRICHING COMMUNITIES GRANT
NEW HILL DEVELOPMENT CORPORATION 401 E. MARKET ST, SUITE 14 CHARLOTTESVILLE, VA 22902	83-1107639	501(C)(3)	7,000.	0.			BAMAWORKS 2021 GRANT
NEW HILL DEVELOPMENT CORPORATION 401 E. MARKET ST, SUITE 14 CHARLOTTESVILLE, VA 22902	83-1107639	501(C)(3)	100,000.	0.			COMMUNITY KITCHEN MEAL PROGRAM, AND FOR HIRING A PROJECT MANAGER TO ADVANCE A COMMUNITY

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NORTH BRANCH SCHOOL 221 MICKENS RD AFTON, VA 22920	52-1353816	501(C)(3)	10,000.	0.			GENERAL OPERATIONS
NORTH CAROLINA CENTRAL UNIVERSITY FOUNDATION - 1801 FAYETTEVILLE ST. - DURHAM, NC 27707	23-7410301	501(C)(3)	20,000.	0.			GENERAL PURPOSES
NORTH CROSS SCHOOL 4254 COLONIAL AVENUE ROANOKE, VA 24018	54-0699572	501(C)(3)	10,000.	0.			LEGACY CAMPAIGN
OLA OF EASTERN LONG ISLAND INC. P.O. BOX 278 SAGAPONACK, NY 11962	43-1997489	501(C)(3)	210,000.	0.			GENERAL PURPOSES
OLA OF EASTERN LONG ISLAND INC. P.O. BOX 278 SAGAPONACK, NY 11962	43-1997489	501(C)(3)	150,000.	0.			PROGRAM SUPPORT
ON OUR OWN CHARLOTTESVILLE PO BOX 1066 CHARLOTTESVILLE, VA 22902	54-1583431	501(C)(3)	12,000.	0.			2021 ENRICHING COMMUNITIES GRANT
ON OUR OWN CHARLOTTESVILLE PO BOX 1066 CHARLOTTESVILLE, VA 22902	54-1583431	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
ON OUR OWN CHARLOTTESVILLE PO BOX 1066 CHARLOTTESVILLE, VA 22902	54-1583431	501(C)(3)	85,000.	0.			GENERAL PURPOSES
ORANGE COUNTY FREE CLINIC 101 C WOODMARK STREET ORANGE, VA 22960	25-1922019	501(C)(3)	12,000.	0.			2021 ENRICHING COMMUNITIES GRANT

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ORANGE COUNTY FREE CLINIC 101 C WOODMARK STREET ORANGE, VA 22960	25-1922019	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
ORANGE COUNTY FREE CLINIC 101 C WOODMARK STREET ORANGE, VA 22960	25-1922019	501(C)(3)	20,000.	0.			GENERAL PURPOSES
ORANGE COUNTY FREE CLINIC PO BOX 441 ORANGE, VA 22960	25-1922019	501(C)(3)	25,000.	0.			SKYLINE CAP COVID RELIEF GRANT
ORANGE COUNTY HUMANE SOCIETY INC. P.O. BOX 852 LOCUST GROVE, VA 22508	54-1824817	501(C)(3)	25,251.	0.			GENERAL PURPOSES
ORANGE VOLUNTEER FIRE COMPANY INC. P.O. BOX 367 ORANGE, VA 22960	54-6052631	501(C)(3)	7,000.	0.			BAMAWORKS 2021 GRANT
PARAMOUNT THEATER OF CHARLOTTESVILLE - 215 E. MAIN STREET - CHARLOTTESVILLE, VA 22902	20-1562018	501(C)(3)	7,000.	0.			BAMAWORKS 2021 GRANT
PARTNER FOR MENTAL HEALTH 911 EAST JEFFERSON STREET CHARLOTTESVILLE, VA 22902	54-0789661	501(C)(3)	10,000.	0.			GENERAL OPERATING
PARTNER FOR MENTAL HEALTH 911 EAST JEFFERSON STREET CHARLOTTESVILLE, VA 22902	54-0789661	501(C)(3)	59,987.	0.			STRENGTHEN THE COORDINATION OF SERVICES AND SUPPORTS PROVIDED TO QUALIFYING INDIVIDUALS
PATH WITH ART 312 2ND AVE S SEATTLE, WA 98104	26-0599518	501(C)(3)	30,000.	0.			GENERAL OPERATIONS

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PATHNORTH 1717 RHODE ISLAND AVE NW WASHINGTON, DC 20036	26-1126743	501(C)(3)	7,000.	0.			GENERAL PURPOSES
PEOPLE AND CONGREGATIONS ENGAGED IN MINISTRY (PACEM) - PO BOX 14 - CHARLOTTESVILLE, VA 22902	20-1434855	501(C)(3)	7,000.	0.			BAMAWORKS 2021 GRANT
PIEDMONT CASA 818 EAST HIGH STREET CHARLOTTESVILLE, VA 22902	54-1704064	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
PIEDMONT CASA 818 EAST HIGH STREET CHARLOTTESVILLE, VA 22902	54-1704064	501(C)(3)	20,000.	0.			BRIDGES PROGRAM
PIEDMONT CASA 818 EAST HIGH STREET CHARLOTTESVILLE, VA 22902	54-1704064	501(C)(3)	25,000.	0.			GENERAL PURPOSES
PIEDMONT ENVIRONMENTAL COUNCIL PO BOX 460 WARRENTON, VA 20188	54-0935569	501(C)(3)	15,000.	0.			GENERAL PURPOSES
PIEDMONT FAMILY YMCA 151 MCINTIRE PARK DRIVE CHARLOTTESVILLE, VA 22902	54-1717336	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
PIEDMONT FAMILY YMCA 151 MCINTIRE PARK DRIVE CHARLOTTESVILLE, VA 22902	54-1717336	501(C)(3)	11,250.	0.			CHRONIC DISEASE PREVENTION
PIEDMONT HABITAT FOR HUMANITY PO BOX 816 FARMVILLE, VA 23901	54-1599433	501(C)(3)	8,000.	0.			2021 ENRICHING COMMUNITIES GRANT

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PIEDMONT HOUSING ALLIANCE 682 BERKMAR CIRCLE CHARLOTTESVILLE, VA 22901	52-1361731	501(C)(3)	200,000.	0.			FOR RENOVATIONS AT 405 PREMIER CIRCLE
PIEDMONT HOUSING ALLIANCE 682 BERKMAR CIRCLE CHARLOTTESVILLE, VA 22901	52-1361731	501(C)(3)	10,000.	0.			2021 ENRICHING COMMUNITIES GRANT
PIEDMONT HOUSING ALLIANCE 682 BERKMAR CIRCLE CHARLOTTESVILLE, VA 22901	52-1361731	501(C)(3)	41,000.	0.			GENERAL PURPOSES
PIEDMONT HOUSING ALLIANCE 682 BERKMAR CIRCLE CHARLOTTESVILLE, VA 22901	52-1361731	501(C)(3)	200,000.	0.			GRANT TO PHA FROM UVA FOR PREMIER CIRCLE PROJECT
PIEDMONT HOUSING ALLIANCE 682 BERKMAR CIRCLE CHARLOTTESVILLE, VA 22901	52-1361731	501(C)(3)	11,250.	0.			HEALTHY COOKING PROGRAMS IN PHA
PIEDMONT HOUSING ALLIANCE 682 BERKMAR CIRCLE CHARLOTTESVILLE, VA 22901	52-1361731	501(C)(3)	250,000.	0.			RECOVERABLE GRANT IN SUPPORT OF RCDF
PIEDMONT HOUSING ALLIANCE 682 BERKMAR CIRCLE CHARLOTTESVILLE, VA 22901	52-1361731	501(C)(3)	500,000.	0.			THE FRIENDSHIP COURT COMMUNITY RESOURCE CENTER INCLUDING THE EARLY LEARNING CENTER
PIEDMONT HOUSING ALLIANCE 682 BERKMAR CIRCLE CHARLOTTESVILLE, VA 22901	52-1361731	501(C)(3)	4,250,000.	0.			THE PREMIER CIRCLE REDEVELOPMENT PROJECT
PIEDMONT REGIONAL DENTAL CLINIC P. O. BOX 151 ORANGE, VA 22960	27-0625764	501(C)(3)	12,000.	0.			2021 ENRICHING COMMUNITIES GRANT

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PIEDMONT REGIONAL DENTAL CLINIC P. O. BOX 151 ORANGE, VA 22960	27-0625764	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
PIEDMONT REGIONAL DENTAL CLINIC P. O. BOX 151 ORANGE, VA 22960	27-0625764	501(C)(3)	25,000.	0.			SKYLINE CAP COVID RELIEF GRANT
PIEDMONT VIRGINIA COMMUNITY COLLEGE - 501 COLLEGE DRIVE - CHARLOTTESVILLE, VA 22902	54-1268264	501(C)(3)	20,000.	0.			GENERAL PURPOSES
PIEDMONT VIRGINIA COMMUNITY COLLEGE - 501 COLLEGE DRIVE - CHARLOTTESVILLE, VA 22902	54-1268264	501(C)(3)	30,000.	0.			GREAT EXPECTATIONS
PIEDMONT VIRGINIA COMMUNITY COLLEGE - 501 COLLEGE DRIVE - CHARLOTTESVILLE, VA 22902	54-1268264	501(C)(3)	25,196.	0.			SUPPORTING NURSING SCHOLARSHIPS AND NURSING EDUCATION AT PIEDMONT VIRGINIA COMMUNITY
PIEDMONT VIRGINIA COMMUNITY COLLEGE - 501 COLLEGE DRIVE - CHARLOTTESVILLE, VA 22902	54-1268264	501(C)(3)	10,000.	0.			THE ANNE TENNANT BRYAN SCHOLARSHIP
PIEDMONT VIRGINIA COMMUNITY COLLEGE - 501 COLLEGE DRIVE - CHARLOTTESVILLE, VA 22902	54-1268264	501(C)(3)	30,000.	0.			UNRESTRICTED STUDENT SUPPORT FOR GREATEST NEED
PIEDMONT VIRGINIA COMMUNITY COLLEGE EDUCATIONAL FOUNDATION - 501 COLLEGE DRIVE - CHARLOTTESVILLE, VA 22902	52-1241773	501(C)(3)	10,000.	0.			THE DAVID & CAROLYN BEACH SCHOLARSHIP
PILGRIM BAPTIST CHURCH 211 ALBEMARLE STREET CHARLOTTESVILLE, VA 22903	54-1269751	501(C)(3)	10,000.	0.			2021 BAMA WORKS GRANT

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PLANNED PARENTHOOD FEDERATION OF AMERICA - 1110 VERMONT AVE. NW - WASHINGTON, DC 20005	13-1644147	501(C)(3)	15,000.	0.			GENERAL PURPOSES
PLANNED PARENTHOOD HUDSON PECONIC, INC. - 570 TAXTER RD. - ELMSFORD, NY 10523	11-2454790	501(C)(3)	100,000.	0.			GENERAL PURPOSES
PLANNED PARENTHOOD SOUTH ATLANTIC 2964 HYDRAULIC ROAD CHARLOTTESVILLE, VA 22901	56-1282557	501(C)(3)	25,000.	0.			ANNUAL FUND SUPPORT
PLANNED PARENTHOOD SOUTH ATLANTIC 2964 HYDRAULIC ROAD CHARLOTTESVILLE, VA 22901	56-1282557	501(C)(3)	26,000.	0.			GENERAL PURPOSES
PLANNED PARENTHOOD SOUTH ATLANTIC 2964 HYDRAULIC ROAD CHARLOTTESVILLE, VA 22901	56-1282557	501(C)(3)	15,000.	0.			PROJECTS THAT IMPROVE EQUITY & ACCESS TO NEEDED SERVICES
POSTPARTUM SUPPORT VIRGINIA PO BOX 7521 ARLINGTON, VA 22554	26-3029233	501(C)(3)	7,000.	0.			2021 BAMA WORKS GRANT
PRAGER UNIVERSITY FOUNDATION 15021 VENTURA BLVD., #552 SHERMAN OAKS, CA 91403	27-1763901	501(C)(3)	10,000.	0.			GENERAL OPERATIONS
PRESIDENTIAL PRECINCT 427 PARK ST. CHARLOTTESVILLE, VA 22902	46-1084540	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
PRESIDENTIAL PRECINCT 427 PARK ST. CHARLOTTESVILLE, VA 22902	46-1084540	501(C)(3)	15,000.	0.			GENERAL PURPOSES

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PREVENT CHILD ABUSE VIRGINIA 8100 THREE CHOPT ROAD, SUITE 212 RICHMOND, VA 23229	54-1149882	501(C)(3)	33,000.	0.			FAMILIES FORWARD VIRGINIA
PRIME COALITION INC. 104 MT. AUBURN ST CAMBRIDGE, MA 02138	46-4621007	501(C)(3)	250,000.	0.			AZOLLO FUND RECOVERABLE GRANT
PRIME COALITION INC. 104 MT. AUBURN ST CAMBRIDGE, MA 02138	46-4621007	501(C)(3)	150,000.	0.			PRIME IMPACT FUND
PRINCETON UNIVERSITY P. O. BOX 5357 PRINCETON, NJ 08543-9923	21-0634501	501(C)(3)	6,100.	0.			ALUMNI GIVING
PRINCETON UNIVERSITY P. O. BOX 5357 PRINCETON, NJ 08543-9923	21-0634501	501(C)(3)	10,000.	0.			CLASS OF 1972
PROTECT OUR AQUIFER 1910 MADISON AVE. #130 MEMPHIS, TN 38104	81-4731640	501(C)(3)	10,000.	0.			SUPPORT OF MCAP'S WORK
REACH OUT AND READ P. O. BOX 2678 MIDLOTHIAN, VA 23113	04-3481253	501(C)(3)	7,500.	0.			PEDIATRIC ASSOCIATES OF CHARLOTTESVILLE, SITE #9450
READYKIDS 1000 EAST HIGH STREET CHARLOTTESVILLE, VA 22902	54-0546000	501(C)(3)	8,000.	0.			2021 ENRICHING COMMUNITIES GRANT
READYKIDS 1000 EAST HIGH STREET CHARLOTTESVILLE, VA 22902	54-0546000	501(C)(3)	6,000.	0.			2021 LOUISA CO COMM FUND GRANT

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READYKIDS 1000 EAST HIGH STREET CHARLOTTESVILLE, VA 22902	54-0546000	501(C)(3)	25,000.	0.			AN EQUITY CONSULTANT
READYKIDS 1000 EAST HIGH STREET CHARLOTTESVILLE, VA 22902	54-0546000	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
READYKIDS 1000 EAST HIGH STREET CHARLOTTESVILLE, VA 22902	54-0546000	501(C)(3)	25,000.	0.			EQUITY CAPACITY BUILDING
READYKIDS 1000 EAST HIGH STREET CHARLOTTESVILLE, VA 22902	54-0546000	501(C)(3)	55,000.	0.			GENERAL PURPOSES
READYKIDS 1000 EAST HIGH STREET CHARLOTTESVILLE, VA 22902	54-0546000	501(C)(3)	50,000.	0.			READY STEPS EXPANSION
READYKIDS 1000 EAST HIGH STREET CHARLOTTESVILLE, VA 22902	54-0546000	501(C)(3)	25,000.	0.			TEEN COUNSELING PROGRAM
READYKIDS 1000 EAST HIGH STREET CHARLOTTESVILLE, VA 22902	54-0546000	501(C)(3)	10,000.	0.			THE GREATEST NEED
REAL ART WAYS 56 ARBOR ST HARTFORD, CT 06106	06-0958072	501(C)(3)	25,000.	0.			GENERAL PURPOSES
RECLAIMED HOPE INITIATIVE 1195 REDFIELDS RD CHARLOTTESVILLE, VA 22903	84-2649694	501(C)(3)	7,000.	0.			2021 ENRICHING COMMUNITIES GRANT

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REGION TEN COMMUNITY SERVICES BOARD - 500 OLD LYNCHBURG RD., SUITE 212 - CHARLOTTESVILLE, VA 22902	54-1625290	501(C)(3)	10,723.	0.			ANNUAL PAYOUT FOR BLUE RIDGE HOUSE
REGION TEN COMMUNITY SERVICES BOARD - ATTN: REBECCA KENDALL - CHARLOTTESVILLE, VA 22902	54-1625290	501(C)(3)	7,500.	0.			COMMUNITY HEALTH & WELLNESS COALITION
REGIS UNIVERSITY 3333 REGIS BLVD., B-16 DENVER, CO 80221	84-0402707	501(C)(3)	32,250.	0.			LORETTO HEIGHTS SCHOOL OF NURSING CAPTAIN CHARLES MONROSE DEGRUY; FOR A SECOND SCHOOL OF NURSING
REPRESENT US EDUCATION FUND P. O. BOX 60008 FLORENCE, MA 01062	26-3088283	501(C)(3)	20,000.	0.			GENERAL PURPOSES
RESILIENCE EDUCATION PO BOX 4631 CHARLOTTESVILLE, VA 22905	46-1134670	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
RESILIENCE EDUCATION PO BOX 4631 CHARLOTTESVILLE, VA 22905	46-1134670	501(C)(3)	25,000.	0.			SUPPORT OF COO
RETHINK FOOD NYC INC. 75 BROAD STREET NEW YORK, NY 10004	82-1632259	501(C)(3)	15,000.	0.			GENERAL PURPOSES
RIVES C. MINOR AND ASALIE M. PRESTON EDUCATIONAL FOUNDATION - P.O. BOX 274 - CHARLOTTESVILLE, VA 22902	52-1279007	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
RIVES C. MINOR AND ASALIE M. PRESTON EDUCATIONAL FOUNDATION - P.O. BOX 274 - CHARLOTTESVILLE, VA 22902	52-1279007	501(C)(3)	10,000.	0.			GENERAL PURPOSES

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ROCKFISH PRESBYTERIAN CHURCH P. O. BOX 278 NELLYSFORD, VA 22958		CHURCH	10,000.	0.			GENERAL PURPOSES
ROCKFISH VALLEY COMMUNITY CENTER P. O. BOX 106 NELLYSFORD, VA 22958	54-1995069	501(C)(3)	7,000.	0.			BAMAWORKS 2021 GRANT
ROCKFISH WILDLIFE SANCTUARY PO BOX 3 CHARLOTTESVILLE, VA 22902	51-0498181	501(C)(3)	5,500.	0.			BAMAWORKS 2021 GRANT
ROCKFISH WILDLIFE SANCTUARY PO BOX 3 CHARLOTTESVILLE, VA 22902	51-0498181	501(C)(3)	32,000.	0.			GENERAL PURPOSES
ROCKY MOUNTAIN BIOLOGICAL LABORATORY AT GOTHIC - P. O. BOX 519 - CRESTED BUTTE, CO 81224	84-6050523	501(C)(3)	6,500.	0.			ANNUAL FUND
RVAG, INC P. O. BOX 4 SANDY HOOK, VA 23153	47-2801424	501(C)(3)	7,000.	0.			GFM RECOVERY FUND
SALVATION ARMY P. O. BOX 296 CHARLOTTESVILLE, VA 22902	22-2406433	501(C)(3)	25,000.	0.			GENERAL PURPOSES
SANTA COUNCIL OF LOUISA COUNTY 1379 BIBB STORE ROAD LOUISA, VA 23093	54-1473523	501(C)(3)	7,500.	0.			2021 LOUISA CO COMM FUND GRANT
SARARA INSTITUTE 1031 33RD ST. DENVER, CO 80205	82-2386824	501(C)(3)	150,000.	0.			GENERAL OPERATIONS SUPPORT

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SCIENCE DELIVERED 980 KINZLEY CT STAUNTON, VA 24401	47-1889014	501(C)(3)	8,500.	0.			BAMAWORKS 2021 GRANT
SEATTLE JAZZED 3201 E. REPUBLICAN ST. SEATTLE, WA 98112	27-1440873	501(C)(3)	25,000.	0.			HONORING THIS YEAR'S VIRTUAL EVENT
SEATTLE MUSICIANS ACCESS TO SUSTAINABLE HEALTHCARE - 6515 5TH AVE. NW - SEATTLE, WA 98117	81-1717061	501(C)(3)	13,000.	0.			THE ANNUAL CONCERT FUNDRAISER
SECOND STREET GALLERY 115 2ND STREET SE CHARLOTTESVILLE, VA 22902	23-7236126	501(C)(3)	12,000.	0.			2021 ENRICHING COMMUNITIES GRANT
SECOND STREET GALLERY 115 2ND STREET SE CHARLOTTESVILLE, VA 22902	23-7236126	501(C)(3)	8,500.	0.			BAMAWORKS 2021 GRANT
SECOND STREET GALLERY 115 2ND STREET SE CHARLOTTESVILLE, VA 22902	23-7236126	501(C)(3)	10,000.	0.			EXHIBIT SUPPORT: J. DORMAN AND F. DONOSO
SENTARA MARTHA JEFFERSON HOSPITAL FOUNDATION - 500 MARTHA JEFFERSON DRIVE - CHARLOTTESVILLE, VA 22911	30-0041113	501(C)(3)	35,000.	0.			GENERAL PURPOSES
SENTARA MARTHA JEFFERSON HOSPITAL FOUNDATION - 500 MARTHA JEFFERSON DRIVE - CHARLOTTESVILLE, VA 22911	30-0041113	501(C)(3)	25,121.	0.			SUPPORTING NURSING SCHOLARSHIPS AND NURSING EDUCATION FOR EMPLOYEES OF MARTHA JEFFERSON
SEXUAL ASSAULT RESOURCE AGENCY 335 GREENBRIAR DR., SUITE 102 CHARLOTTESVILLE, VA 22901	54-1118534	501(C)(3)	6,000.	0.			2021 LOUISA CO COMM FUND GRANT

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SEXUAL ASSAULT RESOURCE AGENCY 335 GREENBRIAR DR., SUITE 102 CHARLOTTESVILLE, VA 22901	54-1118534	501(C)(3)	15,000.	0.			GENERAL PURPOSES
SEXUAL ASSAULT RESOURCE AGENCY 335 GREENBRIAR DR., SUITE 102 CHARLOTTESVILLE, VA 22901	54-1118534	501(C)(3)	6,000.	0.			GENERAL PURPOSES
SHALOM FOUNDATION P.O. BOX 1354 FRANKLIN, TN 37065	95-4894733	501(C)(3)	7,500.	0.			GENERAL PURPOSES
SHELTER FOR HELP IN EMERGENCY PO BOX 1013 CHARLOTTESVILLE, VA 22902	54-1082222	501(C)(3)	8,900.	0.			2021 BAMA WORKS GRANT
SHELTER FOR HELP IN EMERGENCY PO BOX 1013 CHARLOTTESVILLE, VA 22902	54-1082222	501(C)(3)	12,000.	0.			2021 ENRICHING COMMUNITIES GRANT
SHELTER FOR HELP IN EMERGENCY PO BOX 1013 CHARLOTTESVILLE, VA 22902	54-1082222	501(C)(3)	11,000.	0.			GENERAL OPERATIONS AND MAJOR GIFT CAMPAIGN FOR CRITICAL FACILITY UPGRADE.
SHELTER FOR HELP IN EMERGENCY PO BOX 1013 CHARLOTTESVILLE, VA 22902	54-1082222	501(C)(3)	15,000.	0.			GENERAL PROGRAMS THAT ADVANCE THE MISSION
SHELTER FOR HELP IN EMERGENCY PO BOX 1013 CHARLOTTESVILLE, VA 22902	54-1082222	501(C)(3)	20,000.	0.			MAJOR GIFTS CAMPAIGN - CRITICAL FACILITY UPGRADES
SHELTERING ARMS FOUNDATION 140 EAST SHORE DRIVE, SUITE 200 GLEN ALLEN, VA 23059	54-1615599	501(C)(3)	30,000.	0.			THE SHELTERING ARMS/ VCU HEALTH SYSTEM REHAB INSTITUTE GOOCHLAND COUNTY, FOR THE ANDY

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHELTERING ARMS FOUNDATION 140 EAST SHORE DRIVE, SUITE 200 GLEN ALLEN, VA 23059	54-1615599	501(C)(3)	40,000.	0.			THE SHELTERING ARMS/ VCU HEALTH SYSTEM REHAB INSTITUTE GOOCHLAND COUNTY, FOR THE ANDY
SIN BARRERAS-WITHOUT BARRIERS, INC P.O. BOX 6433 CHARLOTTESVILLE, VA 22906	46-1040727	501(C)(3)	10,000.	0.			2021 BAMA WORKS GRANT
SKYLINE COMMUNITY ACTION PROGRAM (CAP), INC. - P. O. BOX 588 - MADISON, VA 22727	54-1570712	501(C)(3)	7,000.	0.			BAMAWORKS 2021 GRANT
SOLAR UNITED NEIGHBORS 1350 CONNECTICUT AVE. NW WASHINGTON, DC 20036	46-2462990	501(C)(3)	45,000.	0.			OPERATING GRANT IN VIRGINIA
SOUTH PLAINS PRESBYTERIAN CHURCH P. O. BOX 277 KESWICK, VA 22947		CHURCH	25,000.	0.			GENERAL PURPOSES
SOUTHERN ENVIRONMENTAL LAW CENTER 201 WEST MAIN ST., SUITE 14 CHARLOTTESVILLE, VA 22902-5065	52-1436778	501(C)(3)	45,000.	0.			GENERAL PURPOSES
SOUTHERN ENVIRONMENTAL LAW CENTER 201 WEST MAIN ST., SUITE 14 CHARLOTTESVILLE, VA 22902-5065	52-1436778	501(C)(3)	100,000.	0.			STRATEGIC PLAN IMPLEMENTATION
SPECIAL OLYMPICS - VIRGINIA 3212 SKIPWITH ROAD, SUITE 100 RICHMOND, VA 23294	54-1013637	501(C)(3)	7,500.	0.			2021 BAMA WORKS GRANT
ST. ANNE'S-BELFIELD SCHOOL 2132 IVY ROAD CHARLOTTESVILLE, VA 22901	54-0880465	501(C)(3)	10,000.	0.			ANNUAL FUND

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ST. BERNARD PROJECT 2645 TOULOUSE ST. NEW ORLEANS, LA 70119	26-2189665	501(C)(3)	25,000.	0.			HURRICANE IDA RESPONSE
ST. JOHN FAMILY LIFE AND FITNESS CENTER - P. O. BOX 321 - GORDONSVILLE, VA 22942	45-2094028	501(C)(3)	10,000.	0.			ST. JOHN FAMILY LIFE AND FITNESS CENTER
ST. MICHAEL INDIAN SCHOOL PO BOX 650 SAINT MICHAELS, AZ 86511	86-0101517	501(C)(3)	5,750.	0.			GENERAL PURPOSES
ST. PAUL'S MEMORIAL CHURCH 1700 UNIVERSITY AVENUE CHARLOTTESVILLE, VA 22903	54-0584101	501(C)(3)	16,726.	0.			ANNUAL PAYOUT FROM ENDOWMENT FUND
ST. PAUL'S MEMORIAL CHURCH 1701 UNIVERSITY AVENUE CHARLOTTESVILLE, VA 22903	54-0584101	501(C)(3)	76,200.	0.			GENERAL PURPOSES
ST. PAUL'S MEMORIAL CHURCH 1700 UNIVERSITY AVENUE CHARLOTTESVILLE, VA 22903	54-0584101	501(C)(3)	100,000.	0.			SUPPORTING RENOVATION
ST. THOMAS AQUINAS CATHOLIC CHURCH 401 ALDERMAN ROAD CHARLOTTESVILLE, VA 22903		CHURCH	12,250.	0.			FOR CHURCH MORTGAGE, FOR GENERAL OPERATIONS, FOR ORGAN CONCERTS
STANLEY M. ISAACS NEIGHBORHOOD CENTER - 415 EAST 93RD STREET - NEW YORK, NY 10128-6904	13-2572034	501(C)(3)	25,000.	0.			PROGRAM SUPPORT
STATE UNIVERSITY COLLEGE AT ONEONTA FOUNDATION - 308 NETZER ADMN BUILDING - ONEONTA, NY 13820	22-2403203	501(C)(3)	100,000.	0.			ESTABLISHING AN ENDOWED SCHOLARSHIP IN HONOR OF DR. JANE NEPKIE

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STATUE OF LIBERTY ELLIS ISLAND FOUNDATION - 17 BATTERY PLACE - NEW YORK, NY 10004	13-3118415	501(C)(3)	25,000.	0.			PROGRAM SUPPORT
STONE BARNS RESTORATION CORP 630 BEDFORD RD. POCANTICO HILLS, NY 10591	13-4150082	501(C)(3)	100,000.	0.			GENERAL PURPOSES
TANDEM FRIENDS SCHOOL 279 TANDEM LANE CHARLOTTESVILLE, VA 22902	23-7063914	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
TANDEM FRIENDS SCHOOL 279 TANDEM LANE CHARLOTTESVILLE, VA 22902	23-7063914	501(C)(3)	24,260.	0.			GENERAL PURPOSES
TANDEM FRIENDS SCHOOL 279 TANDEM LANE CHARLOTTESVILLE, VA 22902	23-7063914	501(C)(3)	10,000.	0.			THE SCHOLARSHIP FUND
THE BRIDGE MINISTRY P.O. BOX 2402 CHARLOTTESVILLE, VA 22902	54-1820614	501(C)(3)	7,000.	0.			2021 ENRICHING COMMUNITIES GRANT
THE BRIDGE MINISTRY P.O. BOX 2402 CHARLOTTESVILLE, VA 22902	54-1820614	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
THE BRIDGE MINISTRY P.O. BOX 2402 CHARLOTTESVILLE, VA 22902	54-1820614	501(C)(3)	25,505.	0.			CERF GRANT TO BE USED IN RESPONSE TO COVID-19 RELATED COMMUNITY EMERGENCY RESPONSE
THE BRIDGE MINISTRY P.O. BOX 2402 CHARLOTTESVILLE, VA 22902	54-1820614	501(C)(3)	10,000.	0.			NEW BUILDING

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THE BRIDGE MINISTRY P.O. BOX 2402 CHARLOTTESVILLE, VA 22902	54-1820614	501(C)(3)	5,023.	0.			THE SWETT LEARNING CENTER IN HONOR OF JUDGE JAY SWETT
THE BRIDGE PROGRESSIVE ARTS INITIATIVE - P. O. BOX 239 - CHARLOTTESVILLE, VA 22902	20-5528367	501(C)(3)	7,500.	0.			GENERAL OPERATIONS FOR THE FEMINIST UNION OF CHARLOTTESVILLE CREATIVES
THE BRIDGE PROGRESSIVE ARTS INITIATIVE - P. O. BOX 239 - CHARLOTTESVILLE, VA 22902	20-5528367	501(C)(3)	13,115.	0.			"FACE TO FACE: PORTRAITS OF OUR VIBRANT CITY" PROJECT
THE BRIDGE PROGRESSIVE ARTS INITIATIVE - P. O. BOX 239 - CHARLOTTESVILLE, VA 22902	20-5528367	501(C)(3)	9,000.	0.			MARISA WILLIAMSON'S "UNSETTLING GROUNDS" PROJECT
THE BRIDGE PROGRESSIVE ARTS INITIATIVE - P. O. BOX 239 - CHARLOTTESVILLE, VA 22902	20-5528367	501(C)(3)	10,750.	0.			RESTRICTED PURPOSE FOR THE COST OF INSTALLING OVERHEAD STRING LIGHTING ON THE DOWNTOWN MALL
THE BRIDGE PROGRESSIVE ARTS INITIATIVE - P. O. BOX 239 - CHARLOTTESVILLE, VA 22902	20-5528367	501(C)(3)	19,560.	0.			THE MURAL PROJECT
THE CENTER 540 BELVEDERE BLVD. CHARLOTTESVILLE, VA 22901	54-0735666	501(C)(3)	55,000.	0.			GENERAL PURPOSES
THE CENTER 540 BELVEDERE BLVD. CHARLOTTESVILLE, VA 22901	54-0735666	501(C)(3)	12,500.	0.			THE CENTER AT BELVEDERE FACILITY
THE CENTER FOR BIOLOGICAL DIVERSITY - PO BOX 710 - TUCSON, AZ 85702-0710	27-3943866	501(C)(3)	10,000.	0.			SUPPORTING THE WORK OF BLACK BELT CITIZENS FIGHTING FOR HEALTH AND JUSTICE

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THE DOE FUND 232 EAST 84TH STREET NEW YORK, NY 10028	13-3412540	501(C)(3)	50,000.	0.			PROGRAM SUPPORT
THE FILM COLLABORATIVE INC. 3405 CAZADOR STREET LOS ANGELES, CA 90065	32-0295081	501(C)(3)	12,500.	0.			SUPPORT OF THE BRIDGE MINISTRY FILM
THE FIRST TEE OF GREATER CHARLOTTE 2661 BARRINGER DRIVE CHARLOTTE, NC 28208	56-2245026	501(C)(3)	12,000.	0.			I.B. GRAINGER SCHOLARSHIPS
THE FOUNTAIN FUND 233 4TH ST. NW BOX Z CHARLOTTESVILLE, VA 22902	81-3741447	501(C)(3)	50,000.	0.			EXPANSION OF LOAN FUND TO RICHMOND
THE FOUNTAIN FUND 233 4TH ST. NW BOX Z CHARLOTTESVILLE, VA 22902	81-3741447	501(C)(3)	45,000.	0.			GENERAL PURPOSES
THE FREE BOOK BUS P.O. BOX 5025 CHARLOTTESVILLE, VA 22905	83-2436210	501(C)(3)	5,500.	0.			2021 BAMA WORKS GRANT
THE HAVEN AT FIRST & MARKET P.O. BOX 273 CHARLOTTESVILLE, VA 22902	47-1841856	501(C)(3)	10,000.	0.			2021 BAMA WORKS GRANT
THE HAVEN AT FIRST & MARKET P.O. BOX 273 CHARLOTTESVILLE, VA 22902	47-1841856	501(C)(3)	12,000.	0.			2021 ENRICHING COMMUNITIES GRANT
THE HAVEN AT FIRST & MARKET 112 W. MARKET STREET CHARLOTTESVILLE, VA 22902	47-1841856	501(C)(3)	19,000.	0.			GENERAL PURPOSES

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THE HAVEN AT FIRST & MARKET P.O. BOX 273 CHARLOTTESVILLE, VA 22902	47-1841856	501(C)(3)	12,000.	0.			GENERAL PURPOSES
THE NATURE FOUNDATION AT WINTERGREEN - RT. 1, BOX 770 - ROSELAND, VA 22967-9214	54-1689828	501(C)(3)	10,000.	0.			2021 BAMA WORKS GRANT
THE NATURE FOUNDATION AT WINTERGREEN - RT. 1, BOX 770 - ROSELAND, VA 22967-9214	54-1689828	501(C)(3)	35,000.	0.			GENERAL PURPOSES
THE NATURE FOUNDATION AT WINTERGREEN - RT. 1, BOX 770 - ROSELAND, VA 22967-9214	54-1689828	501(C)(3)	20,000.	0.			PROGRAM SUPPORT
THE NORTHWEST SCHOOL 1415 SUMMIT AVE. SEATTLE, WA 98122	91-1061146	501(C)(3)	45,000.	0.			GENERAL PURPOSES
THE OUTREACH CHURCH 1831 SECRETARYS RD SCOTTSVILLE, VA 24590	51-0671396	501(C)(3)	6,500.	0.			BAMAWORKS 2021 GRANT
THE SOHO CENTER 1564 WEST HOOVER ROAD MADISON, VA 22727	13-2943318	501(C)(3)	10,000.	0.			GENERAL PURPOSES
THE VIRGINIA ROWING ASSOCIATION AT THE UNIVERSITY OF VIRGINIA INC - 276 WOODLANDS ROAD - CHARLOTTESVILLE, VA 22901	54-1745147	501(C)(3)	24,858.	0.			USE AT THE DISCRETION OF THE BOARD OF DIRECTORS
THE WOMEN'S INITIATIVE 1101 EAST HIGH STREET, SUITE A CHARLOTTESVILLE, VA 22902	20-5913090	501(C)(3)	12,000.	0.			2021 ENRICHING COMMUNITIES GRANT

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THE WOMEN'S INITIATIVE 1101 EAST HIGH STREET, SUITE A CHARLOTTESVILLE, VA 22902	20-5913090	501(C)(3)	10,000.	0.			ANNUAL SUPPORT
THE WOMEN'S INITIATIVE 1101 EAST HIGH STREET, SUITE A CHARLOTTESVILLE, VA 22902	20-5913090	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
THE WOMEN'S INITIATIVE 1101 EAST HIGH STREET, SUITE A CHARLOTTESVILLE, VA 22902	20-5913090	501(C)(3)	130,000.	0.			GENERAL PURPOSES
THE WOMEN'S INITIATIVE 1101 EAST HIGH STREET, SUITE A CHARLOTTESVILLE, VA 22902	20-5913090	501(C)(3)	100,000.	0.			SUPPORT OF IMPLEMENTATION OF CULTURAL HUMILITY ACTION PLAN
THOMAS JEFFERSON AREA COALITION FOR THE HOMELESS - P.O. BOX 34 - CHARLOTTESVILLE, VA 22902	26-4577927	501(C)(3)	6,500.	0.			BAMAWORKS 2021 GRANT
THOMAS JEFFERSON AREA COALITION FOR THE HOMELESS - P.O. BOX 34 - CHARLOTTESVILLE, VA 22902	26-4577927	501(C)(3)	220,161.	0.			RENOVATION COSTS AT 405 PREMIER CIRCLE
THOMAS JEFFERSON FOUNDATION P.O. BOX 316 CHARLOTTESVILLE, VA 22902	54-0505959	501(C)(3)	39,000.	0.			GENERAL PURPOSES
THRONATEESKA HERITAGE FOUNDATION 100 WEST ROOSEVELT AVE. ALBANY, GA 31701	58-1198471	501(C)(3)	12,500.	0.			PROVIDING FUNDING FOR 4TH GRADERS TO EXPERIENCE THE EDUCATION CENTER
TRAGEDY ASSISTANCE PROGRAM FOR SURVIVORS INC. - 3033 WILSON BOULEVARD, #630 - ARLINGTON, VA 22201	92-0152268	501(C)(3)	25,000.	0.			SUPPORTING THE FAMILIES OF THE 13 MARINE GHOST COMPANY 2/1 MEMBERS KIA IN KABUL.

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TRINITY EPISCOPAL CHURCH 1118 PRESTON AVENUE CHARLOTTESVILLE, VA 22903		CHURCH	7,000.	0.			2021 ENRICHING COMMUNITIES GRANT
TRINITY EPISCOPAL CHURCH 1118 PRESTON AVENUE CHARLOTTESVILLE, VA 22903		CHURCH	7,500.	0.			THE BREAD AND ROSES PROGRAM
UNC CHAPEL HILL SCHOOL OF NURSING FOUNDATION - CB# 7460, CARRINGTON HALL - CHAPEL HILL, NC 27599-7460	58-1508175	501(C)(3)	12,500.	0.			ADDITION TO THE GRAINGER, KLUTTZ, AND WAR HEROES ENDOWED SCHOLARSHIP
UNITED WAY OF GREATER CHARLOTTESVILLE - 200 GARRETT ST., SUITE I - CHARLOTTESVILLE, VA 22902	54-0505882	501(C)(3)	150,000.	0.			CAPACITY BUILDING IN EARLY LEARNERS
UNITED WAY OF GREATER CHARLOTTESVILLE - 200 GARRETT ST., SUITE I - CHARLOTTESVILLE, VA 22902	54-0505882	501(C)(3)	10,000.	0.			GENERAL PURPOSES
UNITED WAY OF GREATER CHARLOTTESVILLE - 200 GARRETT ST., SUITE I - CHARLOTTESVILLE, VA 22902	54-0505882	501(C)(3)	8,586.	0.			2021 ANNUAL ENDOWMENT PAYMENT
UNITY IN COMMUNITY OUTREACH MINISTRY - P.O. BOX 55 - ROSELAND, VA 22967	41-2260416	501(C)(3)	8,000.	0.			2021 BAMA WORKS GRANT
UNITY IN COMMUNITY OUTREACH MINISTRY - P.O. BOX 55 - ROSELAND, VA 22967	41-2260416	501(C)(3)	7,000.	0.			2021 ENRICHING COMMUNITIES GRANT
UNITY IN COMMUNITY OUTREACH MINISTRY - P.O. BOX 55 - ROSELAND, VA 22967	41-2260416	501(C)(3)	8,000.	0.			GENERAL PURPOSES

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UNIVERSITY OF VIRGINIA CHILDREN'S HOSPITAL - P.O. BOX 37963 - BOONE, IA 50036	54-6001796	501(C)(3)	50,000.	0.			SUPPORTING THE FAMILY CENTERED CARE PROGRAM AT UVA'S CHILDREN'S HOSPITAL
UNIVERSITY OF VIRGINIA CURRY SCHOOL OF EDUCATION FOUNDATION - P. O. BOX 400276 - CHARLOTTESVILLE, VA 22904	51-0201344	501(C)(3)	10,000.	0.			THE ANNUAL FUND
UNIVERSITY OF VIRGINIA FOUNDATION P. O. BOX 400218 CHARLOTTESVILLE, VA 22904	54-1682176	501(C)(3)	25,000.	0.			GENERAL PURPOSES
UNIVERSITY OF VIRGINIA LAW SCHOOL FOUNDATION - 580 MASSIE RD. - CHARLOTTESVILLE, VA 22903	54-0838566	501(C)(3)	6,500.	0.			2021 BAMA WORKS GRANT
UNIVERSITY OF VIRGINIA LAW SCHOOL FOUNDATION - 580 MASSIE RD. - CHARLOTTESVILLE, VA 22903	54-0838566	501(C)(3)	6,000.	0.			GENERAL PURPOSES
UNIVERSITY OF VIRGINIA LIBRARY BOX 400314 CHARLOTTESVILLE, VA 22904	54-6001796	501(C)(3)	10,000.	0.			LIBRARY RESTORATION PROJECT
UNIVERSITY OF VIRGINIA NURSING SCHOOL - P. O. BOX 800826 - CHARLOTTESVILLE, VA 22908-0826	54-6001796	501(C)(3)	20,000.	0.			GENERAL PURPOSES
UNIVERSITY OF VIRGINIA NURSING SCHOOL - P. O. BOX 800826 - CHARLOTTESVILLE, VA 22908-0826	54-6001796	501(C)(3)	20,000.	0.			NURSING SCHOLARSHIP DISSEMINATION FUND; NURSING ANNUAL FUND
UNIVERSITY OF VIRGINIA RECTOR AND VISITORS - P. O. BOX 400807 - CHARLOTTESVILLE, VA 22904-4807	54-6001796	501(C)(3)	25,000.	0.			THE FRALIN MUSEUM OF ART

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VICTORY HALL OPERA P. O. BOX 72 CHARLOTTESVILLE, VA 22902	47-4728172	501(C)(3)	5,500.	0.			2021 BAMA WORKS GRANT
VILLANOVA UNIVERSITY 800 LANCASTER AVE VILLANOVA, PA 19085	23-1352688	501(C)(3)	27,500.	0.			THE DONNA SULLIVAN HAVENS NURSING SCHOLARSHIP
VIRGINIA DISCOVERY MUSEUM PO BOX 1128 CHARLOTTESVILLE, VA 22902	54-1189268	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
VIRGINIA DISCOVERY MUSEUM PO BOX 1128 CHARLOTTESVILLE, VA 22902	54-1189268	501(C)(3)	15,000.	0.			CAPACITY BUILDING
VIRGINIA EARLY CHILDHOOD FOUNDATION - 1703 NORTH PARHAM ROAD, SUITE 110 - RICHMOND, VA 23229	20-3970624	501(C)(3)	50,000.	0.			MATCHING FUNDS GRANT TO SUPPORT VIRGINIA EARLY CHILDHOOD FOUNDATION'S CHILD CARE NEXT GRANT
VIRGINIA ENERGY EFFICIENCY COUNCIL 313 E BROAD ST. RICHMOND, VA 23219	47-1752391	501(C)(3)	45,000.	0.			GENERAL OPERATING GRANT
VIRGINIA FOODSHED CAPITAL 101 DEVON RD. CHARLOTTESVILLE, VA 22903	83-3580290	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
VIRGINIA FOUNDATION FOR THE HUMANITIES AND PUBLIC POLICY - 145 EDNAM DRIVE - CHARLOTTESVILLE, VA 22903	54-1435523	501(C)(3)	10,000.	0.			THE ROSEL SCHEWEL FUND - GENERAL PURPOSES
VIRGINIA INSTITUTE OF AUTISM 491 HILLSDALE DRIVE CHARLOTTESVILLE, VA 22901	54-1815297	501(C)(3)	30,000.	0.			GENERAL PURPOSES

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VIRGINIA MUSEUM OF FINE ARTS FOUNDATION - 200 NORTH BOULEVARD - RICHMOND, VA 23220	51-0205333	501(C)(3)	10,000.	0.			GENERAL PURPOSES
VIRGINIA ORGANIZING 703 CONCORD AVENUE CHARLOTTESVILLE, VA 22903	54-1674992	501(C)(3)	7,000.	0.			2021 BAMA WORKS GRANT
VIRGINIA ORGANIZING 703 CONCORD AVENUE CHARLOTTESVILLE, VA 22903	54-1674992	501(C)(3)	10,000.	0.			THE "BUILDING POWER WITH JOINT PLANS OF WORK" PROGRAM
VIRGINIA ORGANIZING 703 CONCORD AVENUE CHARLOTTESVILLE, VA 22903	54-1674992	501(C)(3)	50,000.	0.			COMMUNITY ORGANIZER IN ROANOKE, VIRGINIA IN HONOR OF MICHELE MATTIOLI
VIRGINIA ORGANIZING 703 CONCORD AVENUE CHARLOTTESVILLE, VA 22903	54-1674992	501(C)(3)	12,500.	0.			GENERAL PURPOSES
VIRGINIA ORGANIZING P.O. BOX 809 PEMBROKE, VA 24136	54-1674992	501(C)(3)	50,000.	0.			POWHR
VIRGINIA ORGANIZING 703 CONCORD AVENUE CHARLOTTESVILLE, VA 22903	54-1674992	501(C)(3)	62,500.	0.			VIRGINIA CLINICIANS FOR CLIMATE ACTION
VIRGINIA ORGANIZING 703 CONCORD AVENUE CHARLOTTESVILLE, VA 22903	54-1674992	501(C)(3)	34,688.	0.			VIRGINIA INTERFAITH POWER & LIGHT
VIRGINIA POVERTY LAW CENTER 919 EAST MAIN STREET RICHMOND, VA 23219	54-1093402	501(C)(3)	99,000.	0.			AFFORDABLE CLEAN ENERGY PROJECT

Schedule I (Form 990)

CHARLOTTESVILLE AREA COMMUNITY
FOUNDATION

Schedule I (Form 990)

54-1506312

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VIRGINIA POVERTY LAW CENTER 919 EAST MAIN STREET RICHMOND, VA 23219	54-1093402	501(C)(3)	30,000.	0.			ENERGY EFFICIENCY WEB PORTAL CAPACITY GRANT
VIRGINIA SUPPORTIVE HOUSING P. O. BOX 8585 RICHMOND, VA 23226	54-1444564	501(C)(3)	7,000.	0.			2021 ENRICHING COMMUNITIES GRANT
VIRGINIA SUPPORTIVE HOUSING P. O. BOX 8585 RICHMOND, VA 23226	54-1444564	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
VIRGINIA SUPPORTIVE HOUSING P. O. BOX 8585 RICHMOND, VA 23226	54-1444564	501(C)(3)	19,000.	0.			GENERAL PURPOSES
VOICES FOR VIRGINIA'S CHILDREN 1606 SANTA ROSE RD. HENRICO, VA 23229	54-1726265	501(C)(3)	50,000.	0.			GENERAL PURPOSES
VSDB FOUNDATION P.O. BOX 2069 STAUNTON, VA 24402	27-2894686	501(C)(3)	6,500.	0.			BAMAWORKS 2021 GRANT
WELLESLEY COLLEGE 106 CENTRAL STREET WELLESLEY, MA 02481-8203	04-2103637	501(C)(3)	6,200.	0.			OPERATIONS
WEST VIRGINIA RIVERS COALITION INC. - 3501 MACCORKLE AVE., SE - CHARLESTON, WV 25304	52-1736621	501(C)(3)	10,000.	0.			COORDINATION OF WEST VIRGINIA CLIMATE ALLIANCE
WESTMINSTER PRESBYTERIAN CHURCH 400 RUGBY ROAD CHARLOTTESVILLE, VA 22903		CHURCH	24,000.	0.			GENERAL PURPOSES

Schedule I (Form 990)

CHARLOTTESVILLE AREA COMMUNITY
FOUNDATION

Schedule I (Form 990)

54-1506312

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WESTMINSTER-CANTERBURY OF THE BLUE RIDGE FOUNDATION - 250 PANTOPS MOUNTAIN RD. - CHARLOTTESVILLE, VA 22911	54-1882970	501(C)(3)	10,000.	0.			ANNUAL SUPPORT
WESTMINSTER-CANTERBURY OF THE BLUE RIDGE FOUNDATION - 250 PANTOPS MOUNTAIN RD. - CHARLOTTESVILLE, VA 22911	54-1882970	501(C)(3)	6,000.	0.			GENERAL PURPOSES
WHOLE WOMAN'S HEALTH ALLIANCE 1001 EAST MARKET CHARLOTTESVILLE, VA 22902	46-5318393	501(C)(3)	10,000.	0.			GENERAL PURPOSES
WILD VIRGINIA INC. P. O. BOX 1065 CHARLOTTESVILLE, VA 22902	54-1841861	501(C)(3)	20,000.	0.			GENERAL PURPOSES
WILDLIFE CENTER OF VIRGINIA PO BOX 1557 WAYNESBORO, VA 22980	54-1215402	501(C)(3)	15,000.	0.			GENERAL PURPOSES
WILDLIFE CENTER OF VIRGINIA PO BOX 1557 WAYNESBORO, VA 22980	54-1215402	501(C)(3)	50,000.	0.			WHERE IT'S NEEDED MOST IN FACILITIES IMPROVEMENTS
WILDROCK 6600 BLACKWELLS HOLLOW RD CROZET, VA 22932	47-5279299	501(C)(3)	6,000.	0.			2021 ENRICHING COMMUNITIES GRANT
WILDROCK 2521 SUMMIT RIDGE TRAIL CHARLOTTESVILLE, VA 22911	47-5279299	501(C)(3)	10,000.	0.			BAMAWORKS 2021 GRANT
WILDROCK 6600 BLACKWELLS HOLLOW RD CROZET, VA 22932	47-5279299	501(C)(3)	25,000.	0.			GENERAL PURPOSES

Schedule I (Form 990)

CHARLOTTESVILLE AREA COMMUNITY
FOUNDATION

Schedule I (Form 990)

54-1506312

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WINTERGREEN ADAPTIVE SPORTS / DISABLED SPORTS USA - P. O. BOX 4334 - CHARLOTTESVILLE, VA 22905	54-1818204	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
WOMEN'S GLOBAL EMPOWERMENT FUND PO BOX 6283 DENVER, CO 80206	20-8822616	501(C)(3)	15,000.	0.			GENERAL PURPOSES
WOMEN'S LEARNING PARTNERSHIP 4343 MONTGOMERY AVE, SUITE 201 BETHESDA, MD 20814	52-2199581	501(C)(3)	15,000.	0.			GENERAL PURPOSES
WORLD CENTRAL KITCHEN, INC. 655 NEW YORK AVENUE, 6TH FLOOR WASHINGTON, DC 20001	27-3521132	501(C)(3)	25,000.	0.			EFFORTS IN LOUISIANA RELATED TO HURRICANE IDA
WORLD FEDERATION OF YOUTH CLUBS 2143 METROCENTER BLVD, ORLANDO, FL 32835	84-2274485	501(C)(3)	10,000.	0.			GENERAL PURPOSES
WRITERHOUSE P. O. BOX 222 CHARLOTTESVILLE, VA 22902	26-2082047	501(C)(3)	50,000.	0.			GENERAL PURPOSES
YMCA OF GREATER NEW YORK 5 WEST 63RD STREET NEW YORK, NY 10023	13-1624228	501(C)(3)	250,000.	0.			CAPITAL AND OPERATIONAL COSTS ASSOCIATED WITH THE OPENING OF TWO NEW YMCA BRANCHES IN THE SOUTH
YMCA OF GREATER RICHMOND 2 WEST FRANKLIN STREET RICHMOND, VA 23220	54-0505986	501(C)(3)	10,250.	0.			DESIGN THINKING VCU DA VINCI CENTER PROGRAM AND FOR MATCHING INNOVATION INITIATIVE CHALLENGE
YMCA OF GREATER RICHMOND 2 WEST FRANKLIN STREET RICHMOND, VA 23220	54-0505986	501(C)(3)	10,000.	0.			GOLD STAR FAMILY PROGRAM

Schedule I (Form 990)

**CHARLOTTESVILLE AREA COMMUNITY
FOUNDATION**

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS	176	716,569.	0.		

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

PART I, LINE 2:

THE CHARLOTTESVILLE AREA COMMUNITY FOUNDATION CONDUCTS REGULAR MONITORING AND EVALUATION OF ITS DISCRETIONARY GRANTS. RECIPIENTS OF GRANTS UP TO \$10,000 PROVIDE INTERIM AND FINAL REPORTS ON THEIR ACTIVITIES AND THE FOUNDATION TRACKS SPECIFIC INDICATORS, INCLUDING ACCOMPLISHMENTS OF GOALS AND NUMBER OF PEOPLE REACHED. RECIPIENTS OF LARGER GRANTS AGREE TO A SET OF KEY PERFORMANCE INDICATORS AS PART OF THE GRANT AGREEMENT, AND THE FOUNDATION TRACKS PROGRESS AND ACHIEVEMENT AGAINST THESE INDICATORS OVER THE LIFE OF THE GRANT. THE FOUNDATION TEAM, INCLUDING MEMBERS OF THE

Part IV Supplemental Information

GRANTS PORTFOLIO COMMITTEE, ALSO CONDUCTS SITE VISITS OF GRANTEES. IN ADDITION, THE FOUNDATION TEAM MONITORS USE OF THE CHARITABLE GIFTS FROM COMPONENT FUNDS AS REQUESTED BY DONORS.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: APPALACHIAN MOUNTAIN ADVOCATES

(H) PURPOSE OF GRANT OR ASSISTANCE: STOPPING THE MVP, MVP SOUTHGATE, LAMBERT COMPRESSOR STATION, THE CHICKAHOMINY POWER PLANT AND PIPELINE AND ANY NEW FRACKED GAS INFRASTRUCTURE IN VIRGINIA

NAME OF ORGANIZATION OR GOVERNMENT: APPALACHIAN VOICES

(H) PURPOSE OF GRANT OR ASSISTANCE: STOPPING THE MVP, MVP SOUTHGATE, LAMBERT COMPRESSOR STATION, THE CHICKAHOMINY POWER PLANT AND PIPELINE AND ANY NEW FRACKED GAS INFRASTRUCTURE IN VIRGINIA. THIS IS GIVEN IN HONOR OF JESSICA SIMS

NAME OF ORGANIZATION OR GOVERNMENT: CHESAPEAKE CLIMATE ACTION NETWORK

(H) PURPOSE OF GRANT OR ASSISTANCE: CAPACITY GRANT TO ENABLE CCAN TO CONTRACT WITH INNOVATIVE STRATEGIES TO PROVIDE FUNDRAISING CONSULTING FOR SEVEN AND A HALF MONTHS.

NAME OF ORGANIZATION OR GOVERNMENT: CHESAPEAKE CLIMATE ACTION NETWORK

(H) PURPOSE OF GRANT OR ASSISTANCE: PREVENTING ANY NEW FRACKED GAS INFRASTRUCTURE IN VIRGINIA AND STOPPING COMPLETION OF THE MVP IN HONOR OF ELLE DE LA CANCELA

NAME OF ORGANIZATION OR GOVERNMENT: CHILD HEALTH PARTNERSHIP

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORTING COMMUNITY EFFORTS TO

Part IV Supplemental Information

ASSIST YOUNG FAMILIES IN NEED OF HEALTH AND SUPPORTIVE CARE

NAME OF ORGANIZATION OR GOVERNMENT: CORNELL UNIVERSITY

(H) PURPOSE OF GRANT OR ASSISTANCE: ARTS & SCIENCE , ENGINEERING,

JOHNSON SCHOOL OF BUSINESS FOR THESE SPORTS PROGRAMS: HOCKEY, LACROSSE &
SOCCER

NAME OF ORGANIZATION OR GOVERNMENT: COUNTY OF ALBEMARLE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO FUND A DEDICATED FULL-TIME

PROGRAM COORDINATOR FOR THE YANCEY SCHOOL COMMUNITY CENTER (YSCC),
INFRASTRUCTURE FOR A COMMUNITY GARDEN, AND SUPPORT COMMUNITY PROGRAMMING
FOR RURAL SOUTHERN ALBEMARLE

NAME OF ORGANIZATION OR GOVERNMENT: INTERNATIONAL RESCUE COMMITTEE

(H) PURPOSE OF GRANT OR ASSISTANCE: NEW ROOTS COMMUNITY WELLNESS GARDENS

TO SUPPORT & EXPAND IRC-MANAGED COMMUNITY GARDENS FOR =120 PARTICIPANTS

NAME OF ORGANIZATION OR GOVERNMENT: LONGWOOD UNIVERSITY FOUNDATION INC

(H) PURPOSE OF GRANT OR ASSISTANCE: INITIAL FUNDING FOR THE ELIZABETH

REBECCA ROBERTSON JOHNSON/FRANCES BLAND ROBERTSON FIVEASH ENDOWED NURSING
MERIT SCHOLARSHIP AND ANNUAL SCHOLARSHIPS

NAME OF ORGANIZATION OR GOVERNMENT: MONTPELIER FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: DEVELOPING A CURRICULUM AND DIALOGUE

PARTNERSHIP ACPS TO HELP ADDRESS SYSTEMIC RACIAL INEQUITIES WITHIN ACPS
THROUGH TEACHER PROFESSIONAL DEVELOPMENT, CURRICULUM DEVELOPMENT AND
IMPLEMEN

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: NEW HILL DEVELOPMENT CORPORATION

(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY KITCHEN MEAL PROGRAM, AND
FOR HIRING A PROJECT MANAGER TO ADVANCE A COMMUNITY GROCERY STORE
COOPERATIVE

NAME OF ORGANIZATION OR GOVERNMENT: PARTNER FOR MENTAL HEALTH

(H) PURPOSE OF GRANT OR ASSISTANCE: STRENGTHEN THE COORDINATION OF
SERVICES AND SUPPORTS PROVIDED TO QUALIFYING INDIVIDUALS DISCHARGED FROM
UNIVERSITY OF VIRGINIA EMERGENCY DEPARTMENT

NAME OF ORGANIZATION OR GOVERNMENT: PIEDMONT VIRGINIA COMMUNITY COLLEGE

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORTING NURSING SCHOLARSHIPS AND
NURSING EDUCATION AT PIEDMONT VIRGINIA COMMUNITY COLLEGE (PVCC)

NAME OF ORGANIZATION OR GOVERNMENT: REGIS UNIVERSITY

(H) PURPOSE OF GRANT OR ASSISTANCE: LORETTO HEIGHTS SCHOOL OF NURSING
CAPTAIN CHARLES MONROSE DEGRUY; FOR A SECOND SCHOOL OF NURSING CAPTAIN
CHARLES MONROSE DEGRUY ANNUAL SCHOLARSHIP

NAME OF ORGANIZATION OR GOVERNMENT: SCHOOL OF BUSINESS FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: MERIT BASED SCHOLARSHIP FOR A
STUDENT IN THE EVENING MBA DIGITAL MARKETING CLASS OR THE EXECUTIVE MBA
PROGRAM

NAME OF ORGANIZATION OR GOVERNMENT:

SENTARA MARTHA JEFFERSON HOSPITAL FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORTING NURSING SCHOLARSHIPS AND
NURSING EDUCATION FOR EMPLOYEES OF MARTHA JEFFERSON HOSPITAL

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: SHELTERING ARMS FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: THE SHELTERING ARMS/ VCU HEALTH
SYSTEM REHAB INSTITUTE GOOCHLAND COUNTY, FOR THE ANDY HARRISON BENNETT
CONFERENCE ROOM

NAME OF ORGANIZATION OR GOVERNMENT: SHELTERING ARMS FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: THE SHELTERING ARMS/ VCU HEALTH
SYSTEM REHAB INSTITUTE GOOCHLAND COUNTY, FOR THE ANDY HARRISON BENNETT
CONFERENCE ROOM

NAME OF ORGANIZATION OR GOVERNMENT:

TRAGEDY ASSISTANCE PROGRAM FOR SURVIVORS INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORTING THE FAMILIES OF THE 13
MARINE GHOST COMPANY 2/1 MEMBERS KIA IN KABUL.
IN MEMORY OF NAVY CORPSMAN MAX SOVIK AND HIS FELLOW MARINES KIA.

NAME OF ORGANIZATION OR GOVERNMENT: YMCA OF GREATER NEW YORK

(H) PURPOSE OF GRANT OR ASSISTANCE: CAPITAL AND OPERATIONAL COSTS
ASSOCIATED WITH THE OPENING OF TWO NEW YMCA BRANCHES IN THE SOUTH BRONX
AND NORTHEAST BRONX

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2021

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization **CHARLOTTEVILLE AREA COMMUNITY FOUNDATION** Employer identification number **54-1506312**

Part I Questions Regarding Compensation

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

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

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

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

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

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

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

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

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

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

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

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

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

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

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

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

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2021

**CHARLOTTESVILLE AREA COMMUNITY
FOUNDATION**

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) BRENNAN GOULD PRESIDENT, TREASURER & CEO	(i)	238,953.	32,272.	0.	11,152.	21,897.	304,274.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization **CHARLOTTEVILLE AREA COMMUNITY FOUNDATION** Employer identification number **54-1506312**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	90	13,630,875.	NYSE/AMEX/NASDAQ
10 Securities - Closely held stock	X	1	2,996,268.	FAIR MARKET VALUE
11 Securities - Partnership, LLC, or trust interests	X	1	34,921,205.	FAIR MARKET VALUE
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ()				
26 Other ()				
27 Other ()				
28 Other ()				

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

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

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

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

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

b If "Yes," describe in Part II.

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

	Yes	No
30a		X
31	X	
32a		X

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

Schedule M (Form 990) 2021

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

Multiple horizontal lines for supplemental information.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public
Inspection

Name of the organization CHARLOTTEVILLE AREA COMMUNITY FOUNDATION	Employer identification number 54-1506312
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FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

STRATEGIC PARTNERSHIP OF HOUSING-RELATED NONPROFITS, PROVIDING A
MEDIUM-TERM SAFE HAVEN FOR THOSE EXPERIENCING HOMELESSNESS, WHILE ALSO
ADDRESSING THE REGION'S HISTORICAL HOMELESSNESS CHALLENGES. THE
FOUNDATION AWARDED A FIRST-OF-ITS-KIND \$4.25 MILLION GRANT FROM THE
COMMUNITY FOUNDATION: \$3.6 MILLION FROM THE COMMUNITY ENDOWMENT FUND
AND \$650,000 FROM THE COMMUNITY EMERGENCY RESPONSE FUND, OF WHICH \$3.6
MILLION IS RECOVERABLE AND WILL BE RETURNED TO THE COMMUNITY FOUNDATION
TO BE REINVESTED IN FUTURE PROJECTS THAT BENEFIT THE REGION.

WE FACILITATE PHILANTHROPY FOR POSITIVE CHANGE IN OUR COMMUNITY. IN
2021, WE DISTRIBUTED ALMOST \$28.6 MILLION TO 856 NONPROFITS. GRANTS
WENT TO HEALTH CARE, EDUCATION, CHILDREN'S SERVICES, ANIMAL WELFARE,
ENVIRONMENT, AND THE ARTS. CHARITABLE DOLLARS ALSO SUPPORTED SCHOOLS,
PARKS, COMMUNITY FACILITIES AND SERVICES, CAMPS, CLUBS, AND DAY CARE
FOR ALL AGES.

WE ARE COMMITTED TO EXCELLENCE IN FUND MANAGEMENT. IN 2021, ASSETS
UNDER ADMINISTRATION TOTALED \$339.6 MILLION.
WE ENDED THE YEAR WITH A NET INVESTMENT RETURN OF 13.1% AND A TEN-YEAR
ANNUALIZED NET INVESTMENT RETURN OF 11.83%. IN 2021, WE OPENED 18 NEW
FUNDS, BRINGING THE TOTAL OF FUNDS UNDER MANAGEMENT TO 407 FUNDS.
THESE FUNDS INCLUDE 60 SCHOLARSHIP FUNDS AND 105 AGENCY FUNDS.

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

RETURN IS REVIEWED BY THE AUDIT COMMITTEE AND A COPY IS PROVIDED TO THE
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) 2021

Name of the organization CHARLOTTEVILLE AREA COMMUNITY FOUNDATION	Employer identification number 54-1506312
---	--

BOARD BEFORE FILING.

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

ANNUAL CONFLICT OF INTEREST FORMS ARE SIGNED BY BOARD MEMBERS.

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

THE BOARD CHAIRMAN FORMED A COMMITTEE INCLUDING PEOPLE NOT ON THE BOARD, REVIEWED DATA FROM FOUNDATIONS, AND MADE RECOMMENDATIONS TO THE EXECUTIVE COMMITTEE AND BOARD.

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

ANNUAL REPORT AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON OUR WEBSITE, CACFONLINE.ORG, OR UPON REQUEST.

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

CHANGE IN VALUE SPLIT INTEREST AGREEMENTS	-3,632,911.
INCOME FROM PASSTHROUGH ENTITY	-2,631,575.
TOTAL TO FORM 990, PART XI, LINE 9	-6,264,486.

Type and Entity: PRE-2018 NOL FED **DETAIL CARRYOVER SCHEDULE**

Section 382 Annual Limitation		Section 382 Carryover									
Year Originated	Original Carryover Amount	Total Amount Used	Amount Used for 12/31/16	Amount Used for 12/31/17	Amount Used for 12/31/18	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
A	2010	190,166.	190,166.								
B	2011	301,713.	301,713.	6,264.	58,638.	7,969.					
C											
D											
E											
F											
G											
H											
I											
J											
K											
L											
M											
N											
O											
P											
Q											
R											
S											
T											
U											
V											
W											
Detail Type	E S B C	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
A											
B											
C											
D											
E											
F											
G											
H											
I											
J											
K											
L											
M											
N											
O											
P											
Q											
R											
S											
T											
U											
V											
W											

Form **990-W**
(Worksheet)

**Estimated Tax on Unrelated Business Taxable
Income for Tax-Exempt Organizations**

OMB No. 1545-0047

(and on Investment Income for Private Foundations) FORM 990-T

2022

Department of the Treasury
Internal Revenue Service

▶ Go to www.irs.gov/Form990W for instructions and the latest information.
▶ Keep for your records. Do not send to the Internal Revenue Service.

1	Unrelated business taxable income expected in the tax year		1
2	Tax on the amount on line 1. See instructions for tax computation		2
3	Alternative minimum tax for trusts. See instructions		3
4	Total. Add lines 2 and 3		4
5	Estimated tax credits. See instructions		5
6	Subtract line 5 from line 4		6
7	Other taxes. See instructions		7
8	Total. Add lines 6 and 7		8
9	Credit for federal tax paid on fuels. See instructions		9
10a	Subtract line 9 from line 8. Note: If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see instructions	10a	
b	Enter the tax shown on the 2021 return. See instructions. Caution: If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c	10b	13,160.
c	2022 Estimated Tax. Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c	10c	13,160.

		(a)	(b)	(c)	(d)	
11	Installment due dates. See instructions	11	04/18/22	06/15/22	09/15/22	12/15/22
12	Required installments. Enter 25% of line 10c in columns (a) through (d). But see instructions if the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization."	12	3,290.	3,290.	3,290.	3,290.
13	2021 Overpayment. See instructions	13	3,290.	3,290.	3,290.	3,290.
14	Payment due (Subtract line 13 from line 12)	14				

LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-W** (2022)

ESTIMATED TAX	13,160.
OVERPAYMENT APPLIED	13,160.
AMOUNT DUE	0.

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

2021

Department of the Treasury
Internal Revenue Service

For calendar year 2021 or other tax year beginning _____, and ending _____

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

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

<p>A <input type="checkbox"/> Check box if address changed.</p> <p>B Exempt under section <input checked="" type="checkbox"/> 501(c)(3)) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a) <input type="checkbox"/> 529A</p>	<p>Print or Type</p>	<p>Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) CHARLOTTEVILLE AREA COMMUNITY FOUNDATION</p> <p>Number, street, and room or suite no. If a P.O. box, see instructions. P.O. BOX 1767</p> <p>City or town, state or province, country, and ZIP or foreign postal code CHARLOTTEVILLE, VA 22902</p>	<p>D Employer identification number 54-1506312</p> <p>E Group exemption number (see instructions)</p> <p>F <input type="checkbox"/> Check box if an amended return.</p>
<p>C Book value of all assets at end of year ▶ 339,690,669.</p>			

G Check organization type ▶ 501(c) corporation 501(c) trust 401(a) trust Other trust

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

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

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

K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ Yes No
If "Yes," enter the name and identifying number of the parent corporation. ▶

L The books are in care of ▶ **ORGANIZATION TREASURER** Telephone number ▶ **(434) 296-1024**

Part I Total Unrelated Business Taxable Income		
1 Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	1	63,668.
2 Reserved	2	
3 Add lines 1 and 2	3	63,668.
4 Charitable contributions (see instructions for limitation rules)	4	0.
5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3	5	63,668.
6 Deduction for net operating loss. See instructions	6	
7 Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5	7	63,668.
8 Specific deduction (generally \$1,000, but see instructions for exceptions)	8	1,000.
9 Trusts. Section 199A deduction. See instructions	9	
10 Total deductions. Add lines 8 and 9	10	1,000.
11 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero	11	62,668.

Part II Tax Computation		
1 Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21)	1	13,160.
2 Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Part I, line 11 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	2	
3 Proxy tax. See instructions	3	
4 Other tax amounts. See instructions	4	
5 Alternative minimum tax (trusts only)	5	
6 Tax on noncompliant facility income. See instructions	6	
7 Total. Add lines 3 through 6 to line 1 or 2, whichever applies	7	13,160.

LHA For Paperwork Reduction Act Notice, see instructions.

Part III Tax and Payments				
1a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a		
b	Other credits (see instructions)	1b		
c	General business credit. Attach Form 3800 (see instructions)	1c		
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	1d		
e	Total credits. Add lines 1a through 1d	1e		
2	Subtract line 1e from Part II, line 7	2		13,160.
3	Other amounts due. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach statement)	3		
4	Total tax. Add lines 2 and 3 (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here	4		13,160.
5	Current net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 4	5		0.
6a	Payments: A 2020 overpayment credited to 2021	6a		
b	2021 estimated tax payments. Check if section 643(g) election applies	6b	72,600.	
c	Tax deposited with Form 8868	6c	30,000.	
d	Foreign organizations: Tax paid or withheld at source (see instructions)	6d		
e	Backup withholding (see instructions)	6e		
f	Credit for small employer health insurance premiums (attach Form 8941)	6f		
g	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439	6g		
	<input type="checkbox"/> Form 4136 <input type="checkbox"/> Other			
7	Total payments. Add lines 6a through 6g	7		102,600.
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached	8		63.
9	Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed	9		
10	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid	10		89,377.
11	Enter the amount of line 10 you want: Credited to 2022 estimated tax 13,160. Refunded	11		76,217.

Part IV Statements Regarding Certain Activities and Other Information (see instructions)			
1	At any time during the 2021 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here	Yes	No
			X
2	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?		X
	If "Yes," see instructions for other forms the organization may have to file.		
3	Enter the amount of tax-exempt interest received or accrued during the tax year		
4	Enter available pre-2018 NOL carryovers here		
5	Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.		
	Business Activity Code	Available post-2017 NOL carryover	
		\$	
		\$	
6a	Did the organization change its method of accounting? (see instructions)		X
b	If 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," explain in Part V		

Part V Supplemental Information

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

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
	Signature of officer _____ Date _____	CEO _____ Title _____	May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed PTIN
	VIRGINIA R. BELCHER			P00421964
	Firm's name ▶ KEITER, STEPHENS, HURST, GARY & SHREAVE	Firm's EIN ▶ 54-1631262		
	Firm's address ▶ 4401 DOMINION BLVD GLEN ALLEN, VA 23060		Phone no. (804) 747-0000	

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

Department of the Treasury
Internal Revenue Service

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

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

1
OMB No. 1545-0047

2021

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

A Name of the organization CHARLOTTEVILLE AREA COMMUNITY FOUNDATION	B Employer identification number 54-1506312
C Unrelated business activity code (see instructions) ▶ 812900	D Sequence: 1 of 1

E Describe the unrelated trade or business ▶ **INCOME FROM PASSTHROUGH INVESTMENT**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a Gross receipts or sales				
b Less returns and allowances	c Balance ▶			
2 Cost of goods sold (Part III, line 8)	1c			
3 Gross profit. Subtract line 2 from line 1c	2			
4 a Capital gain net income (attach Sch D (Form 1041 or Form 1120)). See instructions	3			
b Net gain (loss) (Form 4797) (attach Form 4797). See instructions	4a			
c Capital loss deduction for trusts	4b			
5 Income (loss) from a partnership or an S corporation (attach statement) STATEMENT 1	4c			
6 Rent income (Part IV)	5	63,668.		63,668.
7 Unrelated debt-financed income (Part V)	6			
8 Interest, annuities, royalties, and rents from a controlled organization (Part VI)	7			
9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)	8			
10 Exploited exempt activity income (Part VIII)	9			
11 Advertising income (Part IX)	10			
12 Other income (see instructions; attach statement)	11			
13 Total. Combine lines 3 through 12	12	63,668.		63,668.
	13			

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

1 Compensation of officers, directors, and trustees (Part X)					
2 Salaries and wages					
3 Repairs and maintenance					
4 Bad debts					
5 Interest (attach statement). See instructions					
6 Taxes and licenses					
7 Depreciation (attach Form 4562). See instructions		7			
8 Less depreciation claimed in Part III and elsewhere on return		8a		8b	
9 Depletion					
10 Contributions to deferred compensation plans					
11 Employee benefit programs					
12 Excess exempt expenses (Part VIII)					
13 Excess readership costs (Part IX)					
14 Other deductions (attach statement)					
15 Total deductions. Add lines 1 through 14					0.
16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)					63,668.
17 Deduction for net operating loss. See instructions					0.
18 Unrelated business taxable income. Subtract line 17 from line 16					63,668.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2021

Part III Cost of Goods Sold Enter method of inventory valuation ▶

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

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

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

A _____

B _____

C _____

D _____

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

Part V Unrelated Debt-Financed Income (see instructions)

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

A _____

B _____

C _____

D _____

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

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

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

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

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

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

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

Part IX Advertising Income

1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis.

- A
- B
- C
- D

Enter amounts for each periodical listed above in the corresponding column.

	A	B	C	D
2 Gross advertising income				
Add columns A through D. Enter here and on Part I, line 11, column (A)				0.

a				
3 Direct advertising costs by periodical				
a Add columns A through D. Enter here and on Part I, line 11, column (B)				0.

4 Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter zero on line 8

- 5 Readership costs
- 6 Circulation income
- 7 Excess readership costs. If line 6 is less than line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter zero
- 8 Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7

a Add line 8, columns A through D. Enter the greater of the line 8a, columns total or zero here and on Part II, line 13

Part X Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percentage of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	

Total. Enter here and on Part II, line 1

Part XI Supplemental Information (see instructions)

FORM 990-T (A)

INCOME (LOSS) FROM PARTNERSHIPS

STATEMENT 1

DESCRIPTION	NET INCOME OR (LOSS)
INCOME FROM PASSTHROUGH ENTITY - ORDINARY BUSINESS INCOME (LOSS)	63,668.
TOTAL INCLUDED ON SCHEDULE A, PART I, LINE 5	63,668.

Underpayment of Estimated Tax by Corporations

▶ Attach to the corporation's tax return. **FORM 990-T**

2021

▶ Go to www.irs.gov/Form2220 for instructions and the latest information.

Name CHARLOTTEVILLE AREA COMMUNITY FOUNDATION	Employer identification number 54-1506312
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Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

Part I Required Annual Payment			
1 Total tax (see instructions)		1	13,160.
2 a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2a		
b Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method	2b		
c Credit for federal tax paid on fuels (see instructions)	2c		
d Total. Add lines 2a through 2c		2d	
3 Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty		3	13,160.
4 Enter the tax shown on the corporation's 2020 income tax return. See instructions. Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5		4	72,576.
5 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3		5	13,160.

Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

6 The corporation is using the adjusted seasonal installment method.

7 The corporation is using the annualized income installment method.

8 The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

Part III Figuring the Underpayment					
		(a)	(b)	(c)	(d)
9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year	9	04/15/21	06/15/21	09/15/21	12/15/21
10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column	10	3,290.	3,290.	3,290.	3,290.
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions	11			54,450.	18,150.
Complete lines 12 through 18 of one column before going to the next column.					
12 Enter amount, if any, from line 18 of the preceding column	12				44,580.
13 Add lines 11 and 12	13			54,450.	62,730.
14 Add amounts on lines 16 and 17 of the preceding column	14		3,290.	6,580.	
15 Subtract line 14 from line 13. If zero or less, enter -0-	15	0.	0.	47,870.	62,730.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-	16		3,290.	0.	
17 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18	17	3,290.	3,290.		
18 Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column	18			44,580.	

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

Part IV Figuring the Penalty

	(a)	(b)	(c)	(d)
19 Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions 19				
20 Number of days from due date of installment on line 9 to the date shown on line 19	20			
21 Number of days on line 20 after 4/15/2021 and before 7/1/2021	21			
22 Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 3\% (0.03)}{365}$...	22 \$	\$	\$	\$
23 Number of days on line 20 after 6/30/2021 and before 10/1/2021	23			
24 Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 3\% (0.03)}{365}$...	24 \$	\$	\$	\$
25 Number of days on line 20 after 9/30/2021 and before 1/1/2022	25			
26 Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 3\% (0.03)}{365}$...	26 \$	\$	\$	\$
27 Number of days on line 20 after 12/31/2021 and before 4/1/2022	27	SEE ATTACHED WORKSHEET		
28 Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 3\% (0.03)}{365}$...	28 \$	\$	\$	\$
29 Number of days on line 20 after 3/31/2022 and before 7/1/2022	29			
30 Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{365}$	30 \$	\$	\$	\$
31 Number of days on line 20 after 6/30/2022 and before 10/1/2022	31			
32 Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{365}$	32 \$	\$	\$	\$
33 Number of days on line 20 after 9/30/2022 and before 1/1/2023	33			
34 Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{365}$	34 \$	\$	\$	\$
35 Number of days on line 20 after 12/31/2022 and before 3/16/2023	35			
36 Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{365}$	36 \$	\$	\$	\$
37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37 \$	\$	\$	\$
38 Penalty. Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns	38 \$			63.

* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

**FORM 990-T
UNDERPAYMENT OF ESTIMATED TAX WORKSHEET**

Name(s) CHARLOTTESVILLE AREA COMMUNITY FOUNDATION				Identifying Number 54-1506312	
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
		-0-			
04/15/21	3,290.	3,290.	61	.000082192	16.
06/15/21	3,290.	6,580.	87	.000082192	47.
09/10/21	-54,450.	-47,870.			
09/15/21	3,290.	-44,580.			
12/15/21	3,290.	-41,290.			
12/15/21	-18,150.	-59,440.			
03/31/22	0.	-59,440.	45	.000109589	

Penalty Due (Sum of Column F). **63.**

* Date of estimated tax payment, withholding credit date or installment due date.

112511
04-01-21