

Form **8879-TE**

# IRS E-file Signature Authorization for a Tax Exempt Entity

OMB No. 1545-0047

For calendar year 2024, or fiscal year beginning \_\_\_\_\_, 2024, and ending \_\_\_\_\_, 20\_\_\_\_

# 2024

Department of the Treasury  
Internal Revenue Service

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

**Go to [www.irs.gov/Form8879TE](http://www.irs.gov/Form8879TE) for the latest information.**

Name of filer

**DEACONESS FOUNDATION**

EIN or SSN

**34-1372066**

Name and title of officer or person subject to tax **CATHY BELK  
PRESIDENT**

## Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

|  |                                     |   |                          |
|--|-------------------------------------|---|--------------------------|
| <b>1a</b> Form 990 check here .....      | <input type="checkbox"/>            | <b>b Total revenue</b> , if any (Form 990, Part VIII, column (A), line 12) .....    | <b>1b</b> _____          |
| <b>2a</b> Form 990-EZ check here ...     | <input type="checkbox"/>            | <b>b Total revenue</b> , if any (Form 990-EZ, line 9) .....                         | <b>2b</b> _____          |
| <b>3a</b> Form 1120-POL check here ..... | <input type="checkbox"/>            | <b>b Total tax</b> (Form 1120-POL, line 22) .....                                   | <b>3b</b> _____          |
| <b>4a</b> Form 990-PF check here ...     | <input checked="" type="checkbox"/> | <b>b Tax based on investment income</b> (Form 990-PF, Part V, line 5) .....         | <b>4b</b> <u>50,238.</u> |
| <b>5a</b> Form 8868 check here .....     | <input type="checkbox"/>            | <b>b Balance due</b> (Form 8868, line 3c) .....                                     | <b>5b</b> _____          |
| <b>6a</b> Form 990-T check here .....    | <input type="checkbox"/>            | <b>b Total tax</b> (Form 990-T, Part III, line 4) .....                             | <b>6b</b> _____          |
| <b>7a</b> Form 4720 check here .....     | <input type="checkbox"/>            | <b>b Total tax</b> (Form 4720, Part III, line 1) .....                              | <b>7b</b> _____          |
| <b>8a</b> Form 5227 check here .....     | <input type="checkbox"/>            | <b>b FMV of assets at end of tax year</b> (Form 5227, Item D) .....                 | <b>8b</b> _____          |
| <b>9a</b> Form 5330 check here .....     | <input type="checkbox"/>            | <b>b Tax due</b> (Form 5330, Part II, line 19) .....                                | <b>9b</b> _____          |
| <b>10a</b> Form 8038-CP check here ..... | <input type="checkbox"/>            | <b>b Amount of credit payment requested</b> (Form 8038-CP, Part III, line 22) ..... | <b>10b</b> _____         |

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

Under penalties of perjury, I declare that  I am an officer of the above entity or  I am a person subject to tax with respect to (name of entity) \_\_\_\_\_, (EIN) \_\_\_\_\_ and that I have examined a copy of the 2024 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

**PIN: check one box only**

I authorize CIUNI & PANICHI, INC. to enter my PIN 72066  
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the tax year 2024 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2024 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax

Date

## Part III Certification and Authentication

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

**34462344122**

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2024 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature CIUNI & PANICHI, INC. Date 05/16/25

**ERO Must Retain This Form - See Instructions**

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

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

Form **8879-TE** (2024)

LHA 402521 12-26-24

For calendar year 2024 or tax year beginning

, and ending

|  |   |  |
|--|---|--|
| Name of foundation<br><b>DEACONESS FOUNDATION</b>  |   | <b>A Employer identification number</b><br><b>34-1372066</b>   |
| Number and street (or P.O. box number if mail is not delivered to street address)<br><b>PO BOX 5787</b>  | Room/suite  | <b>B Telephone number</b><br><b>216-503-9351</b>   |
| City or town, state or province, country, and ZIP or foreign postal code<br><b>CLEVELAND, OH 44101</b>   |   | <b>C</b> If exemption application is pending, check here ... <input type="checkbox"/>  |
| <b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity<br><input type="checkbox"/> Final return <input type="checkbox"/> Amended return<br><input type="checkbox"/> Address change <input type="checkbox"/> Name change |   | <b>D 1.</b> Foreign organizations, check here ..... <input type="checkbox"/><br><b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation ..... <input type="checkbox"/> |
| <b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation<br><input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation   |   | <b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here ... <input type="checkbox"/>   |
| <b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16)<br>\$ <b>59,925,646.</b>   | <b>J</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual<br><input type="checkbox"/> Other (specify) _____ | <b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ... <input type="checkbox"/>  |
| (Part I, column (d), must be on cash basis.)   |   |  |

| <b>Part I Analysis of Revenue and Expenses</b><br><small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)</small> |  | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|---|--|------------------------------------|---------------------------|-------------------------|---|
| <b>Revenue</b>  | <b>1</b> Contributions, gifts, grants, etc., received .....                                | 16,656.                            |                           |                         |   |
|   | <b>2</b> Check <input type="checkbox"/> if the foundation is not required to attach Sch. B |                                    |                           |                         |   |
|   | <b>3</b> Interest on savings and temporary cash investments .....                          |                                    |                           |                         |   |
|   | <b>4</b> Dividends and interest from securities .....                                      | 1,668,252.                         | 1,668,252.                |                         | STATEMENT 1   |
|   | <b>5a</b> Gross rents .....  |                                    |                           |                         |   |
|   | <b>b</b> Net rental income or (loss) .....   |                                    |                           |                         |   |
|   | <b>6a</b> Net gain or (loss) from sale of assets not on line 10 .....                      | 2,032,883.                         |                           |                         | STATEMENT 2   |
|   | <b>b</b> Gross sales price for all assets on line 6a ..... <b>7,167,644.</b>               |                                    |                           |                         |   |
|   | <b>7</b> Capital gain net income (from Part IV, line 2) .....                              |                                    | 2,034,545.                |                         |   |
|   | <b>8</b> Net short-term capital gain .....   |                                    |                           | N/A                     |   |
|   | <b>9</b> Income modifications .....  |                                    |                           |                         |   |
|   | <b>10a</b> Gross sales less returns and allowances .....                                   |                                    |                           |                         |   |
| <b>b</b> Less: Cost of goods sold .....   |  |                                    |                           |                         |   |
| <b>c</b> Gross profit or (loss) .....   |  |                                    |                           |                         |   |
| <b>11</b> Other income .....  | 16,551.  | 0.                                 | 0.                        | STATEMENT 8             |   |
| <b>12 Total.</b> Add lines 1 through 11 .....   | 3,734,342.   | 3,702,797.                         | 0.                        |                         |   |
| <b>Operating and Administrative Expenses</b>  | <b>13</b> Compensation of officers, directors, trustees, etc. ....                         | 237,577.                           | 4,681.                    | 0.                      | 232,896.  |
|   | <b>14</b> Other employee salaries and wages .....  | 321,875.                           | 0.                        | 0.                      | 316,613.  |
|   | <b>15</b> Pension plans, employee benefits .....   | 63,800.                            | 0.                        | 0.                      | 63,252.   |
|   | <b>16a</b> Legal fees ..... <b>STMT 3</b>  | 8,304.                             | 0.                        | 0.                      | 7,872.  |
|   | <b>b</b> Accounting fees ..... <b>STMT 4</b>   | 30,041.                            | 0.                        | 0.                      | 28,659.   |
|   | <b>c</b> Other professional fees ..... <b>STMT 5</b>                                       | 55,320.                            | 0.                        | 0.                      | 50,069.   |
|   | <b>17</b> Interest .....   |                                    |                           |                         |   |
|   | <b>18</b> Taxes ..... <b>STMT 6</b>  | 85,303.                            | 0.                        | 0.                      | 30,054.   |
|   | <b>19</b> Depreciation and depletion .....   | 5,543.                             | 0.                        | 0.                      |   |
|   | <b>20</b> Occupancy .....  | 22,029.                            | 0.                        | 0.                      | 22,965.   |
|   | <b>21</b> Travel, conferences, and meetings .....  | 21,575.                            | 0.                        | 0.                      | 21,530.   |
|   | <b>22</b> Printing and publications .....  |                                    |                           |                         |   |
|   | <b>23</b> Other expenses ..... <b>STMT 7</b>   | 278,944.                           | 83,847.                   | 0.                      | 192,223.  |
|   | <b>24 Total operating and administrative expenses.</b> Add lines 13 through 23 .....       | 1,130,311.                         | 88,528.                   | 0.                      | 966,133.  |
|   | <b>25</b> Contributions, gifts, grants paid .....  | 1,999,351.                         |                           |                         | 1,999,351.  |
| <b>26 Total expenses and disbursements.</b> Add lines 24 and 25 .....   | 3,129,662.   | 88,528.                            | 0.                        | 2,965,484.              |   |
| <b>27</b> Subtract line 26 from line 12:  |  |                                    |                           |                         |   |
| <b>a</b> Excess of revenue over expenses and disbursements ...  | 604,680.   |                                    |                           |                         |   |
| <b>b</b> Net investment income (if negative, enter -0-)   |  | 3,614,269.                         |                           |                         |   |
| <b>c</b> Adjusted net income (if negative, enter -0-)   |  |                                    | 0.                        |                         |   |

| Part II Balance Sheets   | Attached schedules and amounts in the description column should be for end-of-year amounts only.                            | Beginning of year | End of year    |                       |
|--|---|-------------------|----------------|-----------------------|
|  |   | (a) Book Value    | (b) Book Value | (c) Fair Market Value |
| Assets   | 1 Cash - non-interest-bearing   | 33,837.           | 26,352.        | 26,352.               |
|  | 2 Savings and temporary cash investments  | 215,661.          | 281,531.       | 281,531.              |
|  | 3 Accounts receivable   |                   |                |                       |
|  | Less: allowance for doubtful accounts   |                   |                |                       |
|  | 4 Pledges receivable  |                   |                |                       |
|  | Less: allowance for doubtful accounts   |                   |                |                       |
|  | 5 Grants receivable   |                   |                |                       |
|  | 6 Receivables due from officers, directors, trustees, and other disqualified persons  |                   |                |                       |
|  | 7 Other notes and loans receivable  |                   |                |                       |
|  | Less: allowance for doubtful accounts   |                   |                |                       |
|  | 8 Inventories for sale or use   |                   |                |                       |
|  | 9 Prepaid expenses and deferred charges   | 22,939.           | 12,842.        | 12,842.               |
|  | 10a Investments - U.S. and state government obligations   |                   |                |                       |
|  | b Investments - corporate stock   |                   |                |                       |
|  | c Investments - corporate bonds   |                   |                |                       |
|  | 11 Investments - land, buildings, and equipment: basis  |                   |                |                       |
| Less: accumulated depreciation   |   |                   |                |                       |
| 12 Investments - mortgage loans  |   |                   |                |                       |
| 13 Investments - other   | STMT 9<br>56,002,963.   | 59,588,759.       | 59,588,759.    |                       |
| 14 Land, buildings, and equipment: basis   | 39,407.   |                   |                |                       |
| Less: accumulated depreciation   | 23,245.   | 19,521.           | 16,162.        |                       |
| 15 Other assets (describe)   |   |                   |                |                       |
| 16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I) | 56,294,921.   | 59,925,646.       | 59,925,646.    |                       |
| Liabilities  | 17 Accounts payable and accrued expenses  | 44,342.           | 189,134.       |                       |
|  | 18 Grants payable   |                   |                |                       |
|  | 19 Deferred revenue   |                   |                |                       |
|  | 20 Loans from officers, directors, trustees, and other disqualified persons   |                   |                |                       |
|  | 21 Mortgages and other notes payable  |                   |                |                       |
|  | 22 Other liabilities (describe)   |                   |                |                       |
|  | 23 Total liabilities (add lines 17 through 22)  | 44,342.           | 189,134.       |                       |
| Net Assets or Fund Balances  | Foundations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 24, 25, 29, and 30. |                   |                |                       |
|  | 24 Net assets without donor restrictions  | 56,250,579.       | 59,736,512.    |                       |
|  | 25 Net assets with donor restrictions   | 0.                | 0.             |                       |
|  | Foundations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 26 through 30.          |                   |                |                       |
|  | 26 Capital stock, trust principal, or current funds   |                   |                |                       |
|  | 27 Paid-in or capital surplus, or land, bldg., and equipment fund   |                   |                |                       |
|  | 28 Retained earnings, accumulated income, endowment, or other funds   |                   |                |                       |
| 29 Total net assets or fund balances   | 56,250,579.   | 59,736,512.       |                |                       |
| 30 Total liabilities and net assets/fund balances  | 56,294,921.   | 59,925,646.       |                |                       |

Part III Analysis of Changes in Net Assets or Fund Balances

|  |   |             |
|--|---|-------------|
| 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) | 1 | 56,250,579. |
| 2 Enter amount from Part I, line 27a   | 2 | 604,680.    |
| 3 Other increases not included in line 2 (itemize) <b>UNREALIZED GAIN ON INVESTMENTS</b>   | 3 | 2,881,253.  |
| 4 Add lines 1, 2, and 3  | 4 | 59,736,512. |
| 5 Decreases not included in line 2 (itemize)   | 5 | 0.          |
| 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29  | 6 | 59,736,512. |

**Part IV Capital Gains and Losses for Tax on Investment Income**

| (a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)   |  | (b) How acquired<br>P - Purchase<br>D - Donation  | (c) Date acquired<br>(mo., day, yr.)  | (d) Date sold<br>(mo., day, yr.) |
|---|--|---|---|----------------------------------|
| <b>1a PUBLICALLY TRADED SECURITIES</b>  |  | P   |   |                                  |
| b   |  |   |   |                                  |
| c   |  |   |   |                                  |
| d   |  |   |   |                                  |
| e   |  |   |   |                                  |
| (e) Gross sales price   | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale   | (h) Gain or (loss)<br>((e) plus (f) minus (g))  |                                  |
| a 7,167,644.  |  | 5,133,099.  | 2,034,545.  |                                  |
| b   |  |   |   |                                  |
| c   |  |   |   |                                  |
| d   |  |   |   |                                  |
| e   |  |   |   |                                  |
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.  |  |   | (l) Gains (Col. (h) gain minus<br>col. (k), but not less than -0-) or<br>Losses (from col. (h)) |                                  |
| (i) FMV as of 12/31/69  | (j) Adjusted basis<br>as of 12/31/69       | (k) Excess of col. (i)<br>over col. (j), if any   |   |                                  |
| a   |  |   | 2,034,545.  |                                  |
| b   |  |   |   |                                  |
| c   |  |   |   |                                  |
| d   |  |   |   |                                  |
| e   |  |   |   |                                  |
| 2 Capital gain net income or (net capital loss)   |  | { If gain, also enter in Part I, line 7<br>If (loss), enter -0- in Part I, line 7 ..... } |   | 2 2,034,545.                     |
| 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):<br>If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in<br>Part I, line 8 ..... |  | { ..... }   |   | 3 2,034,545.                     |

**Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions)**

|  |            |    |         |
|--|------------|----|---------|
| 1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1.<br>Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instructions) |            | 1  | 50,238. |
| b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter<br>4% (0.04) of Part I, line 12, col. (b) .....   |            |    |         |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) .....   |            | 2  | 0.      |
| 3 Add lines 1 and 2 .....  |            | 3  | 50,238. |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) .....   |            | 4  | 0.      |
| 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- .....  |            | 5  | 50,238. |
| 6 Credits/Payments:  |            |    |         |
| a 2024 estimated tax payments and 2023 overpayment credited to 2024 .....  | 6a 60,000. |    |         |
| b Exempt foreign organizations - tax withheld at source .....  | 6b 0.      |    |         |
| c Tax paid with application for extension of time to file (Form 8868) .....  | 6c 0.      |    |         |
| d Backup withholding erroneously withheld .....  | 6d 0.      |    |         |
| 7 Total credits and payments. Add lines 6a through 6d .....  |            | 7  | 60,000. |
| 8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached .....  |            | 8  | 9.      |
| 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed .....  |            | 9  |         |
| 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid .....   |            | 10 | 9,753.  |
| 11 Enter the amount of line 10 to be: Credited to 2025 estimated tax 9,753. Refunded   |            | 11 | 0.      |

**Part VI-A Statements Regarding Activities**

|  | Yes | No  |
|--|-----|-----|
| <b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? .....   |     | X   |
| <b>1b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition .....<br>If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. |     | X   |
| <b>1c</b> Did the foundation file <b>Form 1120-POL</b> for this year? .....  |     | X   |
| <b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:<br>(1) On the foundation. \$ <u>0.</u> (2) On foundation managers. \$ <u>0.</u>  |     |     |
| <b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ <u>0.</u>  |     |     |
| <b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? .....   |     | X   |
| If "Yes," attach a detailed description of the activities.   |     |     |
| <b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .....  |     | X   |
| <b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? .....  | X   |     |
| <b>4b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? .....  | X   |     |
| <b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? .....  |     | X   |
| If "Yes," attach the statement required by <i>General Instruction T</i> .  |     |     |
| <b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:<br>• By language in the governing instrument, or<br>• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? .....                            | X   |     |
| <b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV .....  | X   |     |
| <b>8a</b> Enter the states to which the foundation reports or with which it is registered. See instructions. <u>NONE</u>   |     |     |
| <b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation <u>SEE STATEMENT 10</u>   |     | X   |
| <b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2024 or the tax year beginning in 2024? See the instructions for Part XIII. If "Yes," complete Part XIII .....   |     | X   |
| <b>10</b> Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses .....   |     | X   |
| <b>11</b> At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions .....   |     | X   |
| <b>12</b> Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions .....  |     | X   |
| <b>13</b> Did the foundation comply with the public inspection requirements for its annual returns and exemption application? .....  | X   |     |
| Website address <u>WWW.DEACONESSFDN.ORG</u>  |     |     |
| <b>14</b> The books are in care of <u>CATHY BELK</u> Telephone no. <u>216-503-9351</u><br>Located at <u>PO BOX 5787, CLEVELAND, OH</u> ZIP+4 <u>44101</u>  |     |     |
| <b>15</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> - check here <input type="checkbox"/><br>and enter the amount of tax-exempt interest received or accrued during the year .....   | 15  | N/A |
| <b>16</b> At any time during calendar year 2024, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? .....  |     | X   |
| See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country   |     |     |

**Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

|  | Yes   | No  |
|--|-------|-----|
| <b>1a</b> During the year, did the foundation (either directly or indirectly):   |       |     |
| (1) Engage in the sale or exchange, or leasing of property with a disqualified person? .....   | 1a(1) | X   |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? .....   | 1a(2) | X   |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? .....   | 1a(3) | X   |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? .....   | 1a(4) | X   |
| (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? .....  | 1a(5) | X   |
| (6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) .....  | 1a(6) | X   |
| <b>b</b> If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .....   | 1b    | X   |
| <b>c</b> Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>  |       |     |
| <b>d</b> Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2024? .....   | 1d    | X   |
| <b>2</b> Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):  |       |     |
| <b>a</b> At the end of tax year 2024, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2024? .....  | 2a    | X   |
| If "Yes," list the years _____, _____, _____, _____  |       |     |
| <b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement - see instructions.) .....   | 2b    | N/A |
| <b>c</b> If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. _____, _____, _____, _____  |       |     |
| <b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? .....   | 3a    | X   |
| <b>b</b> If "Yes," did it have excess business holdings in 2024 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2024.) ..... | 3b    | N/A |
| <b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? .....  | 4a    | X   |
| <b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2024? .....   | 4b    | X   |

**Part VI-B** Statements Regarding Activities for Which Form 4720 May Be Required (continued)

|  | Yes                      | No |
|--|--------------------------|----|
| <b>5a</b> During the year, did the foundation pay or incur any amount to:  |                          |    |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  |                          | X  |
| (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?  |                          | X  |
| (3) Provide a grant to an individual for travel, study, or other similar purposes?   |                          | X  |
| (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions  |                          | X  |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  |                          | X  |
| <b>b</b> If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions                   | N/A                      |    |
| <b>c</b> Organizations relying on a current notice regarding disaster assistance, check here   | <input type="checkbox"/> |    |
| <b>d</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d). | N/A                      |    |
| <b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  |                          | X  |
| <b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.  |                          | X  |
| <b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?   |                          | X  |
| <b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?   | N/A                      |    |
| <b>8</b> Is the foundation 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  |

**Part VII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

**1** List all officers, directors, trustees, and foundation managers and their compensation.

| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|----------------------|---|---|---|---------------------------------------|
| SEE STATEMENT 11     |   | 234,050.                                  | 30,349.   | 0.                                    |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |
|                      |   |   |   |                                       |

**2** Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---|---|------------------|---|---------------------------------------|
| DANIELLE CRAWFORD<br>PO BOX 5787, CLEVELAND, OH 44101         | VICE PRESIDENT, GRANTMAKING & STRAT<br>40.00              | 113,362.         | 14,541.   | 0.                                    |
| MARY MARGEVICIUS<br>PO BOX 5787, CLEVELAND, OH 44101          | VICE PRESIDENT, FINANCE & OPERATION<br>40.00              | 98,394.          | 10,399.   | 0.                                    |
|   |   |                  |   |                                       |
|   |   |                  |   |                                       |
|   |   |                  |   |                                       |

Total number of other employees paid over \$50,000 0

**Part VII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

**3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

| (a) Name and address of each person paid more than \$50,000                    | (b) Type of service   | (c) Compensation |
|--|-----------------------|------------------|
| CLEARSTEAD - 1100 SUPERIOR AVENUE EAST, SUITE 700, CLEVELAND, OH 44114         | INVESTMENT CONSULTING | 89,265.          |
|  |                       |                  |
|  |                       |                  |
|  |                       |                  |
|  |                       |                  |
|  |                       |                  |
|  |                       |                  |
|  |                       |                  |
| Total number of others receiving over \$50,000 for professional services ..... |                       | 0                |

**Part VIII-A** Summary of Direct Charitable Activities

| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses |
|--|----------|
| 1 N/A  |          |
| 2  |          |
| 3  |          |
| 4  |          |

**Part VIII-B** Summary of Program-Related Investments

| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. | Amount |
|---|--------|
| 1 N/A   |        |
| 2   |        |
| 3 All other program-related investments. See instructions.  |        |
| Total. Add lines 1 through 3 ..... 0.   |        |

**Part IX Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

|   |   |    |             |
|---|---|----|-------------|
| 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: |   |    |             |
| a   | Average monthly fair market value of securities .....   | 1a | 57,004,366. |
| b   | Average of monthly cash balances .....  | 1b | 2,232,679.  |
| c   | Fair market value of all other assets (see instructions) .....  | 1c |             |
| d   | <b>Total</b> (add lines 1a, b, and c) .....   | 1d | 59,237,045. |
| e   | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) .....       | 1e | 0.          |
| 2   | Acquisition indebtedness applicable to line 1 assets .....  | 2  | 0.          |
| 3   | Subtract line 2 from line 1d .....  | 3  | 59,237,045. |
| 4   | Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions) ..... | 4  | 888,556.    |
| 5   | <b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 .....                                       | 5  | 58,348,489. |
| 6   | <b>Minimum investment return.</b> Enter 5% (0.05) of line 5 .....   | 6  | 2,917,424.  |

**Part X Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here  and do not complete this part.)

|    |  |    |            |
|----|--|----|------------|
| 1  | Minimum investment return from Part IX, line 6 .....   | 1  | 2,917,424. |
| 2a | Tax on investment income for 2024 from Part V, line 5 .....  | 2a | 50,238.    |
| b  | Income tax for 2024. (This does not include the tax from Part V.) .....  | 2b | 876.       |
| c  | Add lines 2a and 2b .....  | 2c | 51,114.    |
| 3  | Distributable amount before adjustments. Subtract line 2c from line 1 .....                                    | 3  | 2,866,310. |
| 4  | Recoveries of amounts treated as qualifying distributions .....  | 4  | 0.         |
| 5  | Add lines 3 and 4 .....  | 5  | 2,866,310. |
| 6  | Deduction from distributable amount (see instructions) .....   | 6  | 0.         |
| 7  | <b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1 ..... | 7  | 2,866,310. |

**Part XI Qualifying Distributions** (see instructions)

|  |   |    |            |
|--|---|----|------------|
| 1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: |   |    |            |
| a  | Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 .....                             | 1a | 2,965,484. |
| b  | Program-related investments - total from Part VIII-B .....  | 1b | 0.         |
| 2  | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes ..... | 2  |            |
| 3  | Amounts set aside for specific charitable projects that satisfy the:  |    |            |
| a  | Suitability test (prior IRS approval required) .....  | 3a |            |
| b  | Cash distribution test (attach the required schedule) .....   | 3b |            |
| 4  | <b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part XII, line 4 .....              | 4  | 2,965,484. |

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**Part XII** Undistributed Income (see instructions)

|  | (a)<br>Corpus | (b)<br>Years prior to 2023 | (c)<br>2023 | (d)<br>2024 |
|--|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2024 from Part X, line 7  |               |                            |             | 2,866,310.  |
| 2 Undistributed income, if any, as of the end of 2024:   |               |                            |             |             |
| a Enter amount for 2023 only   |               |                            | 0.          |             |
| b Total for prior years:   |               | 0.                         |             |             |
| 3 Excess distributions carryover, if any, to 2024:   |               |                            |             |             |
| a From 2019  |               |                            |             |             |
| b From 2020  |               |                            |             |             |
| c From 2021  |               |                            |             |             |
| d From 2022  |               |                            |             |             |
| e From 2023  | 258,766.      |                            |             |             |
| f Total of lines 3a through e  | 258,766.      |                            |             |             |
| 4 Qualifying distributions for 2024 from Part XI, line 4: \$   | 2,965,484.    |                            |             |             |
| a Applied to 2023, but not more than line 2a   |               |                            | 0.          |             |
| b Applied to undistributed income of prior years (Election required - see instructions)  |               | 0.                         |             |             |
| c Treated as distributions out of corpus (Election required - see instructions)  | 0.            |                            |             |             |
| d Applied to 2024 distributable amount   |               |                            |             | 2,866,310.  |
| e Remaining amount distributed out of corpus   | 99,174.       |                            |             |             |
| 5 Excess distributions carryover applied to 2024 (If an amount appears in column (d), the same amount must be shown in column (a).)  | 0.            |                            |             | 0.          |
| 6 Enter the net total of each column as indicated below:   |               |                            |             |             |
| a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5  | 357,940.      |                            |             |             |
| b Prior years' undistributed income. Subtract line 4b from line 2b   |               | 0.                         |             |             |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed |               | 0.                         |             |             |
| d Subtract line 6c from line 6b. Taxable amount - see instructions   |               | 0.                         |             |             |
| e Undistributed income for 2023. Subtract line 4a from line 2a. Taxable amount - see instr.  |               |                            | 0.          |             |
| f Undistributed income for 2024. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2025  |               |                            |             | 0.          |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)       | 0.            |                            |             |             |
| 8 Excess distributions carryover from 2019 not applied on line 5 or line 7   | 0.            |                            |             |             |
| 9 Excess distributions carryover to 2025. Subtract lines 7 and 8 from line 6a  | 357,940.      |                            |             |             |
| 10 Analysis of line 9:   |               |                            |             |             |
| a Excess from 2020   |               |                            |             |             |
| b Excess from 2021   |               |                            |             |             |
| c Excess from 2022   |               |                            |             |             |
| d Excess from 2023   | 258,766.      |                            |             |             |
| e Excess from 2024   | 99,174.       |                            |             |             |

Part XIII Private Operating Foundations (see instructions and Part VI-A, question 9) N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2024, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

Table with 5 columns: (a) 2024, (b) 2023, (c) 2022, (d) 2021, (e) Total. Rows include 2a-e (Qualifying distributions) and 3a-c (Alternative tests).

Part XIV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)

1 Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here [X] if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

**Part XIV** Supplementary Information (continued)

| <b>3 Grants and Contributions Paid During the Year or Approved for Future Payment</b> |   |                                |                                  |                      |
|---|---|--------------------------------|----------------------------------|----------------------|
| Recipient   | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount               |
| Name and address (home or business)   |   |                                |                                  |                      |
| <b>a Paid during the year</b>   |   |                                |                                  |                      |
| ARCHWOOD UNITED CHURCH OF CHRIST<br>2800 ARCHWOOD AVE.<br>CLEVELAND, OH 44109         |   | PC                             | 2024 MISSION OUTREACH            | 3,000.               |
| ARGONAUT<br>2332 PROSPECT AVENUE<br>CLEVELAND, OH 44145                               |   | PC                             | GRANTS                           | 50,000.              |
| BUSINESS VOLUNTEERS UNLIMITED<br>1300 EAST 9TH ST., SUITE 1220<br>CLEVELAND, OH 44114 |   | PC                             | 2024 PRESIDENTS GRANT            | 5,000.               |
| CENTER FOR COMMUNITY SOLUTIONS<br>1300 E 9TH , SUITE 1703<br>CLEVELAND, OH 44114      |   | PC                             | GRANTS                           | 20,000.              |
| CENTER FOR EMPLOYMENT OPPORTUNITIES<br>50 BROADWAY, SUITE 1604<br>NEW YORK, NY 10004  |   | PC                             | GRANTS                           | 50,000.              |
| <b>Total</b>  | <b>SEE CONTINUATION SHEET(S)</b>  |                                |                                  | <b>3a</b> 1,994,000. |
| <b>b Approved for future payment</b>  |   |                                |                                  |                      |
| NONE  |   |                                |                                  |                      |
| <b>Total</b>  |   |                                |                                  |                      |
|   |   |                                |                                  | <b>3b</b> 0.         |



Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

Table with 3 columns: Question, Yes, No. Contains questions 1a through 1c regarding transfers and transactions.

Table with 4 columns: (a) Line no., (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. Contains 'N/A' in column (c).

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? [ ] Yes [X] No

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. Contains 'N/A' in column (a).

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 or trustee: [Signature] Date: [Date] Title: PRESIDENT

May the IRS discuss this return with the preparer shown below? See instr. [X] Yes [ ] No

Table with 6 columns: Preparer's name, Preparer's signature, Date, Check self-employed, Firm's name, Firm's EIN, Firm's address, Phone no. Contains details for James R Komos, CPA.

**Part XIV** Supplementary Information

**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient<br>Name and address (home or business)   | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount            |
|--|---|--------------------------------|----------------------------------|-------------------|
| CHILD CARE RESOURCE CENTER OF CUYAHOGA COUNTY DBA STARTING POINT<br>6001 EUCLID AVENUE, SUITE 200<br>CLEVELAND, OH 44103 |   | PC                             | PRESIDENTS DISCRETIONARY GRANT   | 15,000.           |
| CHURCH OF THE REDEEMER<br>23500 CENTER RIDGE ROAD<br>WESTLAKE, OH 44145  |   | PC                             | 2024 MISSION OUTREACH            | 1,500.            |
| CLAGUE ROAD UNITED CHURCH OF CHRIST<br>3650 CLAGUE ROAD<br>NORTH OLMSTED, OH 44070                                       |   | PC                             | 2024 MISSION OUTREACH GRANT      | 3,000.            |
| CLEVELAND CENTER FOR ARTS & TECHNOLOGY (DBA NEWBRIDGE)<br>3634 EUCLID AVE., SUITE 100<br>CLEVELAND, OH 44115             |   | PC                             | GRANTS                           | 115,000.          |
| GREATER CLEVELAND WORKS<br>1910 CARNEGIE AVE.<br>CLEVELAND, OH 44122   |   | PC                             | GRANTS                           | 40,000.           |
| CLEVELAND NEIGHBORHOOD PROGRESS<br>11327 SHAKER BLVD, STE 500W<br>CLEVELAND, OH 44104                                    |   | PC                             | GRANTS                           | 100,000.          |
| COLLABORATE CLEVELAND<br>2020 CENTER STREET<br>CLEVELAND, OH 44113   |   | PC                             | GRANTS                           | 50,000.           |
| COLLEGE NOW GREATER CLEVELAND<br>1500 WEST 3RD STREET, SUITE 125<br>CLEVELAND, OH 44113                                  |   | PC                             | GRANTS                           | 130,000.          |
| CUYAHOGA COMMUNITY COLLEGE FOUNDATION<br>700 CARNEGIE AVE.<br>CLEVELAND, OH 44115  |   | PC                             | 2024 PRES DISCRETIONARY GRANT    | 20,000.           |
| DOVER CONGREGATIONAL UNITED CHURCH OF CHRIST<br>2239 DOVER CENTER ROAD<br>WESTLAKE, OH 44145                             |   | PC                             | 2024 MISSION OUTREACH            | 3,000.            |
| <b>Total from continuation sheets</b>  |   |                                |                                  | <b>1,866,000.</b> |

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient<br>Name and address (home or business)  | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount   |
|---|---|--------------------------------|----------------------------------|----------|
| EDWINS LEADERSHIP & RESTAURANT INSTITUTE<br>13101 SHAKER SQUARE<br>CLEVELAND, OH 44120              |   | PC                             | GRANTS                           | 50,000.  |
| FAIRFAX RENAISSANCE DEVELOPMENT CORPORATION<br>8111QUINCY AVENUE , SUITE 100<br>CLEVELAND, OH 44104 |   | PC                             | 2024 CONNECTIONS                 | 20,000.  |
| FAITH UNITED CHURCH OF CHRIST<br>5312 MAYFIELD RD<br>CLEVELAND, OH 44124                            |   | PC                             | 2024 MISSION OUTREACH            | 3,000.   |
| FAMILY PROMISE OF GREATER CLEVELAND<br>3470 EAST 152ND ST<br>CLEVELAND, OH 44120                    |   | PC                             | 2024 CONNECTIONS                 | 14,000.  |
| FEDERATED UNITED CHURCH OF CHRIST<br>76 BELL STREET<br>CHAGRIN FALLS, OH 44022                      |   | PC                             | 2024 MISSION OUTREACH GRANT      | 3,000.   |
| FUND FOR OUR ECONOMIC FUTURE<br>PO BOX 6297<br>CLEVELAND, OH 44101                                  |   | PC                             | GRANTS                           | 50,000.  |
| IMANI UNITED CHURCH OF CHRIST<br>1505 EAST 260TH STREET<br>EUCLID, OH 44132                         |   | PC                             | 2024 MISSION OUTREACH GRANT      | 3,000.   |
| LEGAL AID SOCIETY OF CLEVELAND<br>1223 WEST 6TH STREET<br>CLEVELAND, OH 44113                       |   | PC                             | GRANTS                           | 100,000. |
| LOCAL INITIATIVES SUPPORT CORP.<br>28 LIBERTY STREET, 34TH FLOOR<br>NEW YORK, NY 10005              |   | PC                             | GRANTS                           | 90,000.  |
| MENTAL HEALTH ADVOCACY COALITION<br>4500 EUCLID AVENUE<br>CLEVELAND, OH 44103                       |   | PC                             | GRANTS                           | 10,000.  |
| <b>Total from continuation sheets</b>   |   |                                |                                  |          |

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient<br>Name and address (home or business)  | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution        | Amount  |
|---|--|--------------------------------------|--|---------|
| METRO WEST CDO<br>3167 FULTON RD., #303<br>CLEVELAND, OH 44109  |  | PC                                   | 2024 CONNECTIONS                           | 25,000. |
| MIDDLEBURG HEIGHTS COMMUNITY UNITED<br>CHURCH OF CHRIST<br>7165 BIG CREEK PARKWAY<br>MIDDLEBURG HEIGHTS, OH 44130 |  | PC                                   | 2024 MISSION OUTREACH                      | 3,000.  |
| MT. ZION CONGREGATIONAL CHURCH, UCC<br>10723 MAGNOLIA DRIVE<br>CLEVELAND, OH 44106                                |  | PC                                   | 2024 MISSION OUTREACH                      | 3,000.  |
| OHIO EXCELS<br>41 S. HIGH ST., SUITE 2245<br>COLUMBUS, OH 43215   |  | PC                                   | PRESIDENTS<br>DISCRETIONARY GRANTS<br>2024 | 10,000. |
| OHIOGUIDESTONE<br>343 WEST BAGLEY ROAD<br>BEREA, OH 44107   |  | PC                                   | GRANTS                                     | 80,000. |
| OPEN DOORS ACADEMY<br>1427 EAST 36TH STREET, , SUITE 4206A<br>(BUILDING 42, 6TH FLOOR) CLEVELAND,<br>OH 44114     |  | PC                                   | GRANTS                                     | 90,000. |
| PILGRIM CONGREGATIONAL UNITED CHURCH<br>OF CHRIST<br>2592 WEST 14TH STREET<br>CLEVELAND, OH 44113                 |  | PC                                   | 2024 MISSION OUTREACH                      | 3,000.  |
| RE:SOURCE CLEVELAND<br>4115 BRIDGE AVE.<br>CLEVELAND, OH 44113  |  | PC                                   | GRANTS                                     | 50,000. |
| RIDGE ROAD UNITED CHURCH OF CHRIST<br>6050 RIDGE ROAD<br>PARMA, OH 44129  |  | PC                                   | 2024 MISSION OUTREACH<br>RIDGE ROAD UCC    | 3,000.  |
| SAINT MARTIN DE PORRES HIGH SCHOOL<br>6202 ST. CLAIR AVE.<br>CLEVELAND, OH 44103                                  |  | PC                                   | GRANTS                                     | 42,500. |
| <b>Total from continuation sheets</b> .....   |  |                                      |  |         |

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient<br>Name and address (home or business)   | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution | Amount   |
|--|--|--------------------------------------|-------------------------------------|----------|
| SAINT PAUL'S COMMUNITY CHURCH<br>4427 FRANKLIN BLVD.<br>CLEVELAND, OH 44113              |  | PC                                   | 2024 MISSION OUTREACH<br>GRANT      | 3,000.   |
| SAINT PETER UNITED CHURCH OF CHRIST<br>125 EAST RIDGEWOOD DRIVE<br>SEVEN HILLS, OH 44131 |  | PC                                   | 2024 MISSION OUTREACH<br>GRANT      | 3,000.   |
| SMART DEVELOPMENT INC<br>1192 E 40TH ST.<br>CLEVELAND, OH 44114                          |  | PC                                   | 2024 CONNECTIONS                    | 22,000.  |
| STRONGSVILLE UNITED CHURCH OF CHRIST<br>13740 PEARL ROAD<br>STRONGSVILLE, OH 44136       |  | PC                                   | 2024 MISSION OUTREACH               | 3,000.   |
| THE CENTERS FOR FAMILIES & CHILDREN<br>4500 EUCLID AVE.<br>CLEVELAND, OH 44103           |  | PC                                   | GRANTS                              | 115,000. |
| THE CITY MISSION<br>5310 CARNEGIE AVE.<br>CLEVELAND, OH 44103                            |  | PC                                   | 2024 CONNECTIONS                    | 22,000.  |
| THE SALVATION ARMY<br>2507 E. 22ND STREET<br>CLEVELAND, OH 44115                         |  | PC                                   | GRANTS                              | 75,000.  |
| THE SPANISH AMERICAN COMMITTEE<br>4407 LORAIN AVE.<br>CLEVELAND, OH 44113                |  | PC                                   | GRANTS                              | 45,000.  |
| TOWARDS EMPLOYMENT<br>1255 EUCLID AVENUE, SUITE 300<br>CLEVELAND, OH 44115               |  | PC                                   | GRANTS                              | 195,000. |
| WEST PARK UNITED CHURCH OF CHRIST<br>3909 ROCKY RIVER DRIVE<br>CLEVELAND, OH 44111       |  | PC                                   | 2024 MISSION OUTREACH               | 3,000.   |
| <b>Total from continuation sheets</b> .....  |  |                                      |                                     |          |



**Schedule B  
(Form 990)**

(Rev. December 2024)  
Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

Attach to Form 990, 990-EZ, or 990-PF.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

Name of the organization

DEACONESS FOUNDATION

Employer identification number

34-1372066

Organization type (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( ) (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).

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

Schedule B (Form 990) (Rev. 12-2024)

|   |   |
|---|---|
| Name of organization<br><br><b>DEACONESS FOUNDATION</b> | Employer identification number<br><br><b>34-1372066</b> |
|---|---|

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions | (d)<br>Type of contribution   |
|------------|--|----------------------------|---|
| 1          | THE JOHN HUNTINGTON BENEVOLENT FUND<br>C/O THE CLEVELAND FOUNDA<br><hr/> 1422 EUCLID AVENUE, SUITE 1300<br><hr/> CLEVELAND, OH 44115 | \$ 5,953.                  | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.) |
| 2          | THE JOHN R. RAIBLE FUND C/O THE<br>CLEVELAND FOUNDATION<br><hr/> 1422 EUCLID AVENUE, SUITE 1300<br><hr/> CLEVELAND, OH 44115         | \$ 9,277.                  | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.) |
| 3          | FRANK F. SCHEULLER CHARITABLE<br>REMAINDER UNITRUST<br><hr/> 5730 ENNISHANNON PLACE<br><hr/> DUBLIN, OH 43016                        | \$ 1,426.                  | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.) |
|            | <hr/> <hr/> <hr/>  | \$ _____                   | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)            |
|            | <hr/> <hr/> <hr/>  | \$ _____                   | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)            |
|            | <hr/> <hr/> <hr/>  | \$ _____                   | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)            |

|   |   |
|---|---|
| Name of organization<br><br><b>DEACONESS FOUNDATION</b> | Employer identification number<br><br><b>34-1372066</b> |
|---|---|

**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(See instructions.) | (d)<br>Date received |
|------------------------------|--|---|----------------------|
|                              |  | \$ _____  |                      |
|                              |  | \$ _____  |                      |
|                              |  | \$ _____  |                      |
|                              |  | \$ _____  |                      |
|                              |  | \$ _____  |                      |
|                              |  | \$ _____  |                      |
|                              |  | \$ _____  |                      |

|   |   |
|---|---|
| Name of organization<br><br><b>DEACONESS FOUNDATION</b> | Employer identification number<br><br><b>34-1372066</b> |
|---|---|

**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 |
|---|---------------------|--|-------------------------------------|
|   |                     |  |                                     |
| <b>(e) Transfer of gift</b>             |                     |  |                                     |
| 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 |
|   |                     |  |                                     |
| <b>(e) Transfer of gift</b>             |                     |  |                                     |
| 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 |
|   |                     |  |                                     |
| <b>(e) Transfer of gift</b>             |                     |  |                                     |
| 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 |
|   |                     |  |                                     |
| <b>(e) Transfer of gift</b>             |                     |  |                                     |
| Transferee's name, address, and ZIP + 4 |                     | Relationship of transferor to transferee |                                     |
|   |                     |  |                                     |

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 1

| SOURCE            | GROSS AMOUNT | CAPITAL GAINS DIVIDENDS | (A) REVENUE PER BOOKS | (B) NET INVESTMENT INCOME | (C) ADJUSTED NET INCOME |
|-------------------|--------------|-------------------------|-----------------------|---------------------------|-------------------------|
| FIDELITY          | 1,668,252.   | 0.                      | 1,668,252.            | 1,668,252.                | 0.                      |
| TO PART I, LINE 4 | 1,668,252.   | 0.                      | 1,668,252.            | 1,668,252.                | 0.                      |

FORM 990-PF GAIN OR (LOSS) FROM SALE OF ASSETS STATEMENT 2

| (A)<br>DESCRIPTION OF PROPERTY | (B)<br>GROSS<br>SALES PRICE | (C)<br>COST OR<br>OTHER BASIS | (D)<br>EXPENSE OF<br>SALE | MANNER<br>ACQUIRED<br>(E)<br>DEPREC. | DATE<br>ACQUIRED<br>(F)<br>GAIN OR LOSS | DATE<br>SOLD |
|--------------------------------|-----------------------------|-------------------------------|---------------------------|--------------------------------------|---|--------------|
| PUBLICALLY TRADED SECURITIES   |                             |                               |                           | PURCHASED                            |   |              |
|                                | 7,167,644.                  | 5,133,099.                    | 0.                        |                                      | 0.                                      | 2,034,545.   |

| (A)<br>DESCRIPTION OF PROPERTY | (B)<br>GROSS<br>SALES PRICE | (C)<br>COST OR<br>OTHER BASIS | (D)<br>EXPENSE OF<br>SALE | MANNER<br>ACQUIRED<br>(E)<br>DEPREC. | DATE<br>ACQUIRED<br>(F)<br>GAIN OR LOSS | DATE<br>SOLD |
|--------------------------------|-----------------------------|-------------------------------|---------------------------|--------------------------------------|---|--------------|
| FIXED ASSETS                   |                             |                               |                           | PURCHASED                            |   |              |
|                                | 0.                          | 25,127.                       | 0.                        |                                      | 23,465.                                 | -1,662.      |

|                                       |  |  |  |  |  |            |
|---------------------------------------|--|--|--|--|--|------------|
| NET GAIN OR LOSS FROM SALE OF ASSETS  |  |  |  |  |  | 2,032,883. |
| CAPITAL GAINS DIVIDENDS FROM PART IV  |  |  |  |  |  | 0.         |
| TOTAL TO FORM 990-PF, PART I, LINE 6A |  |  |  |  |  | 2,032,883. |

FORM 990-PF LEGAL FEES STATEMENT 3

| DESCRIPTION                | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
|----------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| LEGAL                      | 8,304.                       | 0.                                | 0.                            | 7,872.                        |
| TO FM 990-PF, PG 1, LN 16A | 8,304.                       | 0.                                | 0.                            | 7,872.                        |

| FORM 990-PF                  | ACCOUNTING FEES              |                                   |                               | STATEMENT                     | 4 |
|------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|---|
| DESCRIPTION                  | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |   |
| ACCOUNTING                   | 30,041.                      | 0.                                | 0.                            | 28,659.                       |   |
| TO FORM 990-PF, PG 1, LN 16B | 30,041.                      | 0.                                | 0.                            | 28,659.                       |   |

| FORM 990-PF                  | OTHER PROFESSIONAL FEES      |                                   |                               | STATEMENT                     | 5 |
|------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|---|
| DESCRIPTION                  | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |   |
| MANAGEMENT & CONSULTING      | 55,320.                      | 0.                                | 0.                            | 50,069.                       |   |
| TO FORM 990-PF, PG 1, LN 16C | 55,320.                      | 0.                                | 0.                            | 50,069.                       |   |

| FORM 990-PF                 | TAXES                        |                                   |                               | STATEMENT                     | 6 |
|-----------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|---|
| DESCRIPTION                 | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |   |
| PAYROLL TAXES               | 30,456.                      | 0.                                | 0.                            | 30,054.                       |   |
| NET INVESTMENT INCOME TAX   | 54,847.                      | 0.                                | 0.                            | 0.                            |   |
| TO FORM 990-PF, PG 1, LN 18 | 85,303.                      | 0.                                | 0.                            | 30,054.                       |   |

| FORM 990-PF                 | OTHER EXPENSES               |                                   |                               | STATEMENT                     | 7 |
|-----------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|---|
| DESCRIPTION                 | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |   |
| DUES AND SUBSCRIPTIONS      | 8,597.                       | 0.                                | 0.                            | 8,597.                        |   |
| INSURANCE                   | 29,327.                      | 0.                                | 0.                            | 28,314.                       |   |
| OTHER PURCHASED SERVICES    | 138,739.                     | 0.                                | 0.                            | 140,031.                      |   |
| WORKERS COMP                | 210.                         | 0.                                | 0.                            | 207.                          |   |
| INFORMATION TECHNOLOGY      | 18,224.                      | 0.                                | 0.                            | 15,074.                       |   |
| INVESTMENT MANAGEMENT FEES  | 83,847.                      | 83,847.                           | 0.                            | 0.                            |   |
| TO FORM 990-PF, PG 1, LN 23 | 278,944.                     | 83,847.                           | 0.                            | 192,223.                      |   |

| FORM 990-PF                                     | OTHER INCOME | STATEMENT                   | 8 |
|---|--------------|-----------------------------|---|
| DESCRIPTION                                     |              | (A)<br>REVENUE<br>PER BOOKS |   |
| PROFESSIONAL FEES                               |              | 16,540.                     |   |
| MISCELLANEOUS REVENUE                           |              | 11.                         |   |
| TOTAL TO FORM 990-PF, PART I, LINE 11, COLUMN A |              | 16,551.                     |   |

| FORM 990-PF                                  | OTHER INVESTMENTS   | STATEMENT   | 9                    |
|--|---------------------|-------------|----------------------|
| DESCRIPTION                                  | VALUATION<br>METHOD | BOOK VALUE  | FAIR MARKET<br>VALUE |
| FEDERATED TOTAL RETURN                       | FMV                 | 10,303,604. | 10,303,604.          |
| FIDELITY 500                                 | FMV                 | 12,105,974. | 12,105,974.          |
| TRANSAMERICA                                 | FMV                 | 4,474,716.  | 4,474,716.           |
| VANGUARD EQUITY INCOME                       | FMV                 | 5,225,568.  | 5,225,568.           |
| FIDELITY MID CAP                             | FMV                 | 975,460.    | 975,460.             |
| TRUST DISTRIBUTION ACCOUNT                   | FMV                 | 1,356,497.  | 1,356,497.           |
| NON TRUST - FIDELITY 500                     | FMV                 | 1,967,007.  | 1,967,007.           |
| NON TRUST - VANGUARD WCM                     | FMV                 | 838,493.    | 838,493.             |
| NON TRUST - TRANSAMERICA                     | FMV                 | 650,356.    | 650,356.             |
| NON TRUST - FEDERATED TOTAL RETURN           | FMV                 | 2,129,089.  | 2,129,089.           |
| NON TRUST - FIDELITY MID CAP                 | FMV                 | 334,919.    | 334,919.             |
| NON TRUST DISTRIBUTION ACCOUNT               | FMV                 | 460,178.    | 460,178.             |
| WEATHERLOW FUND                              | FMV                 | 5,541,740.  | 5,541,740.           |
| VANGUARD INTERNATIONAL GROWTH                | FMV                 | 4,604,062.  | 4,604,062.           |
| CLIFFWATER                                   | FMV                 | 3,302,955.  | 3,302,955.           |
| NON TRUST - VANGUARD INTERNATIONAL<br>GROWTH | FMV                 | 644,253.    | 644,253.             |
| NON TRUST - CLIFFWATER                       | FMV                 | 1,015,065.  | 1,015,065.           |
| NON TRUST - BROWN CAPITAL MGMT               | FMV                 | 200,159.    | 200,159.             |
| NON TRUST - HARBOR SCV INST                  | FMV                 | 209,106.    | 209,106.             |
| BROWN CAPITAL MGMT                           | FMV                 | 1,011,916.  | 1,011,916.           |
| HARBOR SCV INST                              | FMV                 | 1,057,147.  | 1,057,147.           |
| NON TRUST - PARADIGM                         | FMV                 | 1,180,495.  | 1,180,495.           |
| TOTAL TO FORM 990-PF, PART II, LINE 13       |                     | 59,588,759. | 59,588,759.          |

FORM 990-PF EXPLANATION CONCERNING PART VI-A, LINE 8B STATEMENT 10

EXPLANATION

THE OHIO ATTORNEY GENERAL HAS EXEMPTED THIS ORGANIZATION FROM REGISTRATION IN THE STATE OF OHIO.

FORM 990-PF PART VII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS STATEMENT 11

| NAME AND ADDRESS                                    | TITLE AND<br>AVRG HRS/WK | COMPEN-<br>SATION | EMPLOYEE<br>BEN PLAN CONTRIB | EXPENSE<br>ACCOUNT |
|---|--------------------------|-------------------|------------------------------|--------------------|
| CATHY BELK<br>PO BOX 5787<br>CLEVELAND, OH 44101    | PRESIDENT & CEO<br>40.00 | 234,050.          | 30,349.                      | 0.                 |
| CARRIE CLARK<br>PO BOX 5787<br>CLEVELAND, OH 44101  | BOARD CHAIR<br>0.50      | 0.                | 0.                           | 0.                 |
| JUSTIN HORTON<br>PO BOX 5787<br>CLEVELAND, OH 44101 | TRUSTEE<br>0.50          | 0.                | 0.                           | 0.                 |
| KENNETH LIANG<br>PO BOX 5787<br>CLEVELAND, OH 44101 | TRUSTEE<br>0.50          | 0.                | 0.                           | 0.                 |
| TOM LITTMAN<br>PO BOX 5787<br>CLEVELAND, OH 44101   | TRUSTEE<br>0.50          | 0.                | 0.                           | 0.                 |
| ANDREA LYONS<br>PO BOX 5787<br>CLEVELAND, OH 44101  | VICE CHAIR<br>0.50       | 0.                | 0.                           | 0.                 |
| ANN O'BRIEN<br>PO BOX 5787<br>CLEVELAND, OH 44101   | TRUSTEE<br>0.50          | 0.                | 0.                           | 0.                 |
| MIGUEL PEREZ<br>PO BOX 5787<br>CLEVELAND, OH 44101  | TRUSTEE<br>0.50          | 0.                | 0.                           | 0.                 |

DEACONESS FOUNDATION

34-1372066

LAURIE POGEL  
PO BOX 5787  
CLEVELAND, OH 44101

SECRETARY

0.50

0.

0.

0.

MELTRICE SHARP  
PO BOX 5787  
CLEVELAND, OH 44101

TREASURER

0.50

0.

0.

0.

ANN ZOLLER  
PO BOX 5787  
CLEVELAND, OH 44101

TRUSTEE

0.50

0.

0.

0.

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VII

234,050.

30,349.

0.