990 Form

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2023

Open to Public Inspection

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

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

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

Α	For the	2023 cal	lendar year, or tax year beginning		, and	ending			-
В		applicable:		s Recreation and Parks Found			Employe	r identif	ication number
X,	Address	change	Doing business as						
		· ·	Number and street (or P.O. box if mail	is not delivered to street address)	Room/suite	83.	-131041	6	
Ш	Name cha	ange	1111 East Broad Street		203	E	Telephon	e numbe	er
	Initial retu	ırn	City or town	State	ZIP code	(64	14) 606 /	=740	
<u>.</u>			Columbus	OH	43205	(6)	14) 626-8	5/40	
	-ınal return	/terminated	Foreign country name F	oreign province/state/county	Foreign posta	al code			
□ .	Amended	l return				G	Gross red	ceipts \$	828,601
$\overline{\Box}$	۸ ــ ـ ا: ـ ـ ـ ا: ـ ـ ـ ا		F Name and address of principal officer:			III(a) la thia a		for our board	linates? Yes X No
<u></u>	Applicatio	on pending			205	H(a) Is this a			
			Daniel Cannon 1111 East Broad	d Street, Columbus, OH 432	205	H(b) Are all		*	
1	Tax-exer	mpt status:	X 501(c)(3) 501(c) ((insert no.) 4947(a)(1	I) or 527	If "No,"	' attach a li	st. See ii	nstructions
J	Website	: WW\	w.crpfoundation.org			H(c) Group	exemption	number	
					1. 7				Note of head describes
		organization		Association Other	LYE	ear of formation	2019	IVIS	State of legal domicile: OH
P	art I		mmary						
-	1		lescribe the organization's missic	•		support, fos	ter, and	aid the	e services,
ည		facilities	, and programs of the City of Col	umbus, Ohio's city recreatio	n centers.				
Activities & Governance						-			
/er	2	Check th	his box if the organization	n discontinued its operations	s or disposed	d of more th	an 25%	of its n	net assets
9	3		of voting members of the govern					3	11
જ	4		of independent voting members					4	11
es	1							5	
έ	5		imber of individuals employed in					-	0
ŧ	6		ımber of volunteers (estimate if n					6	
⋖	7a		related business revenue from P					7a	0
	b	Net unre	elated business taxable income f	rom Form 990-T, Part I, line	<u>11</u>			7b	
						Pri	ior Year		Current Year
<u>e</u>	8	Contribu	utions and grants (Part VIII, line 1	h)			52	7,278	819,686
Revenue	9	Program	n service revenue (Part VIII, line :	2g) . 🔈 . 🕻				0	0
ě	10	Investme	ent income (Part VIII, column (A)	, lines 3, 4, and 7d)			-	6,807	8,915
œ	11		evenue (Part VIII, column (A), line					0	0
	12		enue—add lines 8 through 11 (mus				52	0,471	828,601
	13		and similar amounts paid (Part IX					0	368,189
	14		paid to or for members (Part IX,					0	0
	15		other compensation, employee be					-144	
Ses								372	
eu	16a		ional fundraising fees (Part IX, co					3/2	0
Expenses	b		ndraising expenses (Part IX, colu	, , , , , , , , , , , , , , , , , , , ,)		0.000	200 750
	17		xpenses (Part IX, column (A), line			-		0,390	296,753
	18		penses. Add lines 13-17 (must e		,			0,618	664,942
	19	Revenue	e less expenses, Subtract line 18	3 from line 12				9,853	163,659
Net Assets or Fund Balances						Beginning		_	End of Year
set	20		sets (Part X, line 16)				1,16	1,230	1,324,888
A A	21		bilities (Part X, line 26)					0	0
SP	22	Net asse	ets or fund balances. Subtract lin	e 21 from line 20			1,16	1,230	1,324,888
Pa	ırt II	Sig	ınature Block						
			y, I declare that I have examined this return					-	е
and	belief, it is	s true, corre	ect, and complete. Declaration of preparer	(other than officer) is based on all int	formation of whi	ch preparer has	s any know	ledge.	
Sig	ın								
		Signa	ature of officer				Date		
He	re	Dar	niel Cannon		Boa	ard Chairper	son		
			e or print name and title						
			t/Type preparer's name	Preparer's signature		Date			PTIN
Pa	id							Check	if
	eparer	. Rola	and Dague CPA	Roland Dague CPA		7/30/2	2024 9	self-empl	loyed P00534489
	e Only		n's name Dague Business Ser	vices Inc.		Fin	m's EIN	31-18	307939
US	o Only	<i>'</i>		ırt, Gahanna, OH 43230			one no.		476 - 8777
1//								011	
ivia	y une ih	ง นเรตนร	ss this return with the preparer sh	OWIT SOOVE? SEE INSTRUCTION	S				. X Yes No

	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	To support, foster, and aid the services, facilities, and programs of the City of
	Columbus, Ohio's city recreation centers.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
2	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?
	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 \$ 584,680 including grants of \$ 368,189) (Revenue \$ 819,686)
70	Support the objectives of Recreation and Parks Foundation by creating relationships in the
	community
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)
10	Total program service expenses 584 680

Part IV

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		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>	4		Χ
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? If "Yes," complete Schedule C, Part III	5		Χ
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? If "Yes," complete Schedule D, Part I	6		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>	7	-	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Χ
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Χ
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If</i> "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		
	VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more			V
•	of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i>	11b	-	X
С	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	110	\neg	
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Χ
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Χ
f				
40	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		Χ
h	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes,"</i>	IZa	-	
~	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Χ
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Χ
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Χ
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? If "Yes," complete Schedule F, Parts I and IV	14b		Χ
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.	15		Χ
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Χ
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
40	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions.	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			V
19	Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		X
IJ	If "Yes," complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	

Par	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? If "Yes," complete Schedule I, Parts I and III	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? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Х
	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		X
Ь	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	270		$\stackrel{\wedge}{\vdash}$
LJa	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	25a		<u> </u>
D				
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or	0.5%		\ \ \
	990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			.,
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		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? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule			
	L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	complete Schedule N, Part II			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,			
	III, or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled			
	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	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? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
30	19? Note: All Form 990 filers are required to complete Schedule O	38	X	1
Par		ან		
Par				
	Check if Schedule O contains a response or note to any line in this Part V			<u> —</u>
,			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	Х	

	90 (2023) Columbus Recreation and Parks Foundation 83-131	0416	Р	age 5
Par			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 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		<u> </u>
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	-		V
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c 6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		 ^-
oa	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	- Oa		$\stackrel{\wedge}{\vdash}$
D	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	0.0		
' a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
-	and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
b 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10 a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
 а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand	44.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		X
b 15	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	140		<u> </u>
		15		X
	excess parachute payment(s) during the year?	15		
10	If "Yes," see the instructions and file Form 4720, Schedule N.	40		V
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
17	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities	47		
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

Part VI

Columbus Recreation and Parks Foundation 83-1310416 **Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No"

Sect	ion 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.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 1			
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		Χ
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		Χ
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	Ť		
7 4	one or more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	74		
D	stockholders, or persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	7.0		
0	the year by the following:			
•	The governing body?	8a	Х	
a			$\hat{\mathbf{x}}$	
b	Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	8b		
9	at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	ا ر ا		
Caat		9	<u> </u>	X
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue C	,oae.		N-
40-	Did the approximation have lead shorters broughed an efflicted?	400	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,	40.		
	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	Х	
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? <i>If "No," go to line 13</i>	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	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		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed OH			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 5	01(c)		
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest pol	icy,		
	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			
	Perfect Balance (614) 235-8877			
	2470 East Main Street, Bexley, OH 43209			

Form 990 (2023) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated

Employees, and Independent Contractors

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week	box,	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) compensation compensation The position (E) Reportable Estimate compensation of compensation of compensation compensation from the from related compensation compensation from the from the from the from the compensation compensation compensation from the from									
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	compensation from the organization and related organizations		
(1) Nicholas Jones	1.00											
Director	0.00											
(2) Natasha Booker	1.00											
Director	0.00	Х										
(3) Brian Pauquette	1.00											
Treasurer	0.00			Х								
(4) Daniel Cannon	1.00	1										
Board Chairperson	0.00			Х								
(5) Jim Bender	1.00	1										
Director	0.00	Х										
(6) Randy Ware	1.00											
Secretary	0.00	X		Х								
(7) Jacqueline Bryant	1.00											
Director	0.00	X										
(8) Oyauma Garrison	1.00											
Director	0.00	_			_							
(9) Monica Hawkins	1.00	1										
Director	0.00				_							
(10) Jeffrey Kasler	1.00	1										
Director	0.00				_							
(11) Neil Shingala	1.00	1										
Director	0.00	X			_	\sqcup						
(12)												
(13)												
(14)												

Form **990** (2023)

Page 7

Pa	Section A. Officers, Directors, Tru	ustees, Key Em	ploye	es,	and	HI E	ghes	t Co	ompensated En	iployees (contir	iued)	
	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unles er and	Pos eck s pe	more rson irecto	than of is both or/trust Highest compensated employee	an ee)	(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	con f orgai	(F) ated amount of other opensation rom the nization and organizations
(15)												
(16)												
(17)												
(18)												
(19)											-	
(20)											_	
(21)						(Ĭ			_	
(22)												
(23)			X									
(24)												
(25)		1										
1b	Subtotal		٠	Ч.					0	0		0
С	Total from continuation sheets to Part VII, Se	ection A							0	О		0
<u>d</u>	Total (add lines 1b and 1c)								0	0		0
2	Total number of individuals (including but not line reportable compensation from the organization		sted a	vodi	e) v	vno	recei	vea	more than \$100	J,UUU OT		0
												Yes No
3	Did the organization list any former officer, dire employee on line 1a? <i>If "Yes," complete School</i>						_				3	X
4	For any individual listed on line 1a, is the sum of the organization and related organizations greated in the state of the	ater than \$150,0	00? If	"Үе	s, "	con	nplete	Sc	hedule J for suc	h		
5	individual	ue compensatio								· · · · · · · · · · · · · · · · · · ·	4	X
	for services rendered to the organization? If "Ye										5	Х
Sec 1	tion B. Independent Contractors Complete this table for your five highest compe	ensated indepen	dent d	cont	ract	ore	that r	-000	aived more than	\$100 000 of		
	compensation from the organization. Report co										tax ye	ar.
	(A) Name and business add	ress							(B) Description of ser	vices	(C) Compen	
												0
												0
												0
												0
2	Total number of independent contractors (inclumore than \$100,000 of compensation from the	-	ted to	tho	se I	iste	d abc	ve)	who received			

Part VIII Statement of Revenue

		Check if Schedule O contains a response or	r note to any line in	this Part VIII			🔲
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
y, y	1a	Federated campaigns 1a	0				
ant	b	Membership dues	0				
שַׁ פַּ	С	Fundraising events 1c	0				
ffs,	d	Related organizations	0				
Contributions, Gifts, Grants and Other Similar Amounts	е	Government grants (contributions) 1e	0				
	f	All other contributions, gifts, grants, and					
		similar amounts not included above 1f	819,686				
	g	Noncash contributions included in					
on Pd		lines 1a–1f					
о <u>в</u>	h	Total. Add lines 1a–1f		819,686			
			Business Code				
Program Service Revenue	2a			0			
e ĕ	b			0			
en S	С			0			
ar.	d			0			
Pg R	е			0			
7	f	All other program service revenue		0			
	g	Total. Add lines 2a–2f		0			
	3	Investment income (including dividends, interes					
		other similar amounts)		2,348			
	4	Income from investment of tax-exempt bond pro		0			
	5	Royalties	(ii) Personal	0			
	6a	Gross rents 6a	(ii) i discind				
	b	Less: rental expenses 6b					
	C	Rental income or (loss) 6c 0					
	d	Net rental income or (loss)		0			
	7a	Gross amount from (i) Securities	(ii) Other	Ŭ			
		sales of assets					
		other than inventory 7a 6,567	7 0				
ne	b	Less: cost or other basis					
en		and sales expenses 7b	0				
Revenue	С	Gain or (loss) 7c 6,567	7 0				
0	d	Net gain or (loss)		6,567			
Oth	8a	Gross income from fundraising					
O		events (not including \$ 0					
		of contributions reported on line 1c).					
		See Part IV, line 18					
		Less: direct expenses 8b					
	С	Net income or (loss) from fundraising events .		0			
	9a	Gross income from gaming activities.					
	L	See Part IV, line 19					
		Less: direct expenses		0			
	с 10а	Gross sales of inventory, less		U			
	IUa	returns and allowances					
	b	Less: cost of goods sold					
		Net income or (loss) from sales of inventory	<u> </u>	0			
S	-	The mount of (1999) from sales of invertiory.	Business Code				
on: e	11a			0			
nu	b			0			
scellaneo Revenue	С			0			
Miscellaneous Revenue	d	All other revenue		0			
Σ	е	Total. Add lines 11a–11d		0			
	12	Total revenue. See instructions		828 601	0	0	0

following SOP 98-2 (ASC 958-720)

	t IX Statement of Functional Expenses				
Secti	on 501(c)(3) and 501(c)(4) organizations must complete all d	columns. All other o	rganizations must c	omplete column (A)	
	Check if Schedule O contains a response or note	-		1	
	not include amounts reported on lines 6b, 7b, 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	368,189	368,189		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	0			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
	trustees, and key employees	0		0	
6	Compensation not included above to disqualified				
_	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	0			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	0			
10	Payroll taxes	0			
11	Fees for services (nonemployees):	4			
а	Management	54,164		54,164	
b	Legal	0			
С	Accounting	22,153		22,153	
d	Lobbying	0		,	
е	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	465		465	
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A), amount, list line 11g expenses on Schedule O.)	0		0	
12	Advertising and promotion	10,091	10,091		
13	Office expenses	559		559	
14	Information technology	0			
15	Royalties	0			
16	Occupancy	0			
17	Travel	0			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	1,084		1,084	
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.)				
а	Event expenses and supplies	194,149	194,149		
b	Outside contract services	9,547	9,547		
С	Awards and scholarships	134	134		
d	Credit card processing and bank fees	1,837		1,837	
е	All other expenses	2,570	2,570		
25	Total functional expenses. Add lines 1 through 24e	664,942	584,680	80,262	0
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				

Part X Balance Sheet

		Check if Schedule O contains a response o	r note to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			1,062,750	1	1,247,959
	2	Savings and temporary cash investments		-	95,479	2	73,928
	3	Pledges and grants receivable, net		-	0	3	0
	4	Accounts receivable, net			0	4	0
	5	Loans and other receivables from any current of		-	,		
		trustee, key employee, creator or founder, subs					
		controlled entity or family member of any of the			0	5	
	6	Loans and other receivables from other disqualit	-	-			
	•	under section 4958(f)(1)), and persons describe	0	6			
ţ	7	Notes and loans receivable, net			0	7	0
Assets	8	Inventories for sale or use		-	0	8	
Ą	9	Prepaid expenses and deferred charges		-	0	9	
	10a	Land, buildings, and equipment: cost or	i		7 0		
	Iva	other basis. Complete Part VI of Schedule D	10a	3,001			
	b	Less: accumulated depreciation	10a	3,001	3,001	10c	3,001
	11	Investments—publicly traded securities		<u> </u>	0,001	11	0,001
	12	Investments—other securities. See Part IV, line			0	12	0
	13	Investments—program-related. See Part IV, line			0	13	0
	14	Intangible assets		0	14	0	
	15	Other assets See Part IV line 11			0	15	0
	16	Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equ			1,161,230	16	1,324,888
	17	Accounts payable and accrued expenses	iai iirie 33)		1,101,230	17	1,324,000
	18	Grants payable			0	18	
	19	Deferred revenue		0	19		
	20	Tax-exempt bond liabilities		0	20		
	21	Escrow or custodial account liability. Complete			0	21	
S	22	Loans and other payables to any current or for			U	21	
Liabilities	22	trustee, key employee, creator or founder, sub-					
Ε̈́		controlled entity or family member of any of the			0	22	
Li a	23	Secured mortgages and notes payable to unre			0	23	0
	24	Unsecured notes and loans payable to unrelate			0		0
	25	Other liabilities (including federal income tax, p		-	U	24	0
	25	parties, and other liabilities not included on line					
					0	25	0
	26	Part X of Schedule D			0		0
	20	Total liabilities. Add lines 17 through 25			U	26	0
Ses		Organizations that follow FASB ASC 958, ch	eck here	XI			
an		and complete lines 27, 28, 32, and 33.					
Bal	27	Net assets without donor restrictions		-	1,160,282	27	1,323,940
둳	28	Net assets with donor restrictions		948	28	948	
ׅ֡֡֡֝֟֝֟֝֟֝ ֚		Organizations that do not follow FASB ASC	there				
Net Assets or Fund Balances		and complete lines 29 through 33.					
ts c	29	Capital stock or trust principal, or current funds	0	29			
Se	30	Paid-in or capital surplus, or land, building, or e			0	30	
As	31	Retained earnings, endowment, accumulated in			0	31	
let	32	Total net assets or fund balances			1,161,230		1,324,888
_	33	Total liabilities and net assets/fund balances.			1,161,230	33	1,324,888

Uniform Guidance, 2 C.F.R. Part 200, Subpart F?.

As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

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.

Form **990** (2023)

Χ

SCHEDULE A (Form 990)

Public Charity Status and Public Support

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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.

Employer identification number

Colu	mbı	us Recreation and Parks Founda	ation				83-13	10416			
Par		Reason for Public Char									
The	orga	anization is not a private foundat	,	_			,				
1	Ш	A church, convention of church	es, or association o	f churches described in	n section	170(b)(1)	(A)(i).				
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)									
3		A hospital or a cooperative hos	pital service organiz	zation described in sec	tion 170(b)(1)(A)(ii	i).				
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the										
		hospital's name, city, and state	·								
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)									
6		A federal, state, or local govern	ment or governmen	ntal unit described in s e	ection 170)(b)(1)(A)(v).				
7	X	An organization that normally redescribed in section 170(b)(1)			m a gove	rnmental u	unit or from the gene	ral public	;		
8		A community trust described in			II.)						
9	Ħ	An agricultural research organi				d in conjur	nction with a land-gr	ant collec	ie.		
	ш	or university or a non-land-grar university:							C		
10		An organization that normally re							SS		
		receipts from activities related t support from gross investment acquired by the organization af	income and unrelate	ed business taxable in	come (les	s section !	511 tax) from busine				
11	П	An organization organized and	operated exclusivel	y to test for public safe	ety. See s e	ection 509	9(a)(4).				
12	П	An organization organized and			-			he purpo	ses of		
		one or more publicly supported Check the box on lines 12a thro									
а	a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.										
b	Ī	Type II. A supporting organization.	•		on with its	cunnorta	d organization(s) by	having			
D	ı	control or management of the organization(s). You must o	e supporting organi	zation vested in the sa					d		
С		Type III functionally integra	ated. A supporting o	organization operated i				rated wit	h,		
		its supported organization(s									
d		Type III non-functionally in that is not functionally integr	ated. The organizat	ion generally must sati	isfy a distr	ibution red	quirement and an at	anizatior entivene	ss		
е	ı	requirement (see instruction Check this box if the organize						ااا ۵			
C	I	functionally integrated, or Ty					r type i, type ii, typ	C III			
f		Enter the number of supported							0		
g		Provide the following information									
	(i)	Name of supported organization	(ii) EIN	(iii) Type of organization		organization	(v) Amount of monetary		mount of		
				(described on lines 1–10 above (see instructions))		ur governing ment?	support (see instructions)		upport (see uctions)		
				, , , , , , , , , , , , , , , , , , , ,			<i>'</i>		,		
					Yes	No					
(A)											
(B)											
(C)											
(C)											
(D)											
, -,											
(E)											
Tota	<u> </u>						0		0		

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

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

Sec	tion A. Public Support									
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total			
1	Gifts, grants, contributions, and membership fees received. (Do not	704.050	550 400	700.057	507.070	040.000	0.004.444			
•	include any "unusual grants.")	701,059	552,433	790,657	527,279	819,686	3,391,114			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0			
3	The value of services or facilities									
	furnished by a governmental unit to the									
	organization without charge						0			
4	Total. Add lines 1 through 3	701,059	552,433	790,657	527,279	819,686	3,391,114			
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)									
6	Public support. Subtract line 5 from line 4						3,391,114			
	ction B. Total Support	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total			
_	ndar year (or fiscal year beginning in)				,		,			
7	Amounts from line 4	701,059	552,433	790,657	527,279	819,686	3,391,114			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from									
	similar sources			1,045	2,419	8,915	12,379			
9	Net income from unrelated business activities, whether or not the business is regularly carried on	•					0			
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	•					0			
11	Total support. Add lines 7 through 10						3,403,493			
12	Gross receipts from related activities, etc. (se	ee instructions)				12				
13	First 5 years. If the Form 990 is for the orga	anization's first, sec	ond, third, fourth, o	or fifth tax year as a	a section 501(c)(3)					
	organization, check this box and stop here						X			
Sec	tion C. Computation of Public Su	pport Percenta	age							
14	Public support percentage for 2023 (line 6, c	column (f), divided b	by line 11, column	(f))		14	0.00%			
15	Public support percentage from 2022 Sched	ule A, Part II, line 1	4			15	0.00%			
16a	6a 33 1/3% support test—2023. 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									
b	33 1/3% support test—2022. If the organiz box and stop here. The organization qualified									
17a	10%-facts-and-circumstances test—2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 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									
b	10%-facts-and-circumstances test—2022 15 is 10% or more, and if the organization m in Part VI how the organization meets the fac organization	neets the facts-and- cts-and-circumstan	circumstances tes ces test. The orga	t, check this box ar nization qualifies as	nd stop here. Expl s a publicly suppor	ain ted				
18	Private foundation. If the organization did r	not check a box on	line 13. 16a. 16b	17a, or 17b. check	this box and see					
	instructions		,,,							

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.)

Sec	tion A. Public Support				, , , , , , , , , , , , , , , , , , ,		
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						0
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						0
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						0
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						0
5	The value of services or facilities						
	furnished by a governmental unit to the						_
	organization without charge	_				_	0
6	Total. Add lines 1 through 5	0	0	0	0	0	0
7a	Amounts included on lines 1, 2, and 3						0
	received from disqualified persons						0
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						0
_	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from	0	0	0	0	U U	0
Ü	line 6.)						0
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6	0	0	0	0	0	0
10a	Gross income from interest, dividends,	•					
	payments received on securities loans, rents,	· ·					
	royalties, and income from similar sources						0
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						0
С	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on .						0
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
4.5	(Explain in Part VI.)						0
13							
4.4	and 12.)	0	0	0	0	0	0
14	First 5 years. If the Form 990 is for the organization, check this box and stop here						
800				· · · · · · · ·			
	etion C. Computation of Public Su Public support percentage for 2023 (line 8, c			(f\)		15	0.00%
15 16	Public support percentage for 2023 (fine 6, c		-			16	0.00%
	tion D. Computation of Investmer					10	0.0070
17	Investment income percentage for 2023 (line			column (f))		17	0.00%
18	Investment income percentage from 2022 S		-			18	0.00%
	33 1/3% support tests—2023. If the organi					<u> </u>	2.2070
	not more than 33 1/3%, check this box and s						
b	33 1/3% support tests—2022. If the organi	zation did not chec	k a box on line 14	or line 19a, and lin	ne 16 is more than	33 1/3%, and	
	line 18 is not more than 33 $1/3\%$, check this	box and stop her e	. The organization	qualifies as a pub	licly supported org	anization	<u>L</u>
20	Private foundation. If the organization did	not check a box on	line 14, 19a, or 19	b, check this box a	and see instructions	3	

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

2023

Open to Public Inspection

ITAIIIC	of the organization		Linployer identification number					
Colu	nbus Recreation and Parks Foundation	83-1310416						
Par								
	Complete if the organization answere							
	,	(a) Donor advised funds	(b) Funds and other accounts					
1	Total number at end of year		<u> </u>					
2	Aggregate value of contributions to (during year)							
3	Aggregate value of grants from (during year)		1					
4	Aggregate value at end of year							
5	Did the organization inform all donors and donor	L	d in depart advised					
9	funds are the organization's property, subject to	_						
6	Did the organization inform all grantees, donors							
0	only for charitable purposes and not for the ber							
	conferring impermissible private benefit?							
Dom			· · · · · · · · · · Yes No					
Par		dilly all an East 000 Dark IV Iba 7						
	Complete if the organization answere							
1	Purpose(s) of conservation easements held by							
	Preservation of land for public use (for examp	le, recreation or education) Preservatio	n of a historically important land area					
	Protection of natural habitat	Preservatio	n of a certified historic structure					
	Preservation of open space							
2	Complete lines 2a through 2d if the organization	n held a qualified conservation contribution	in the form of a conservation					
_	easement on the last day of the tax year.	Tricia a qualifica seriestration continuation	Held at the End of the Tax Year					
а	Total number of conservation easements		2a					
b	Total acreage restricted by conservation easen							
C	Number of conservation easements on a certifi							
d	Number of conservation easements included o							
-	not on a historic structure listed in the National Register							
3	Number of conservation easements modified, t		inated by the organization during					
	the tax year		, 3					
4	Number of states where property subject to conservation easement is located							
5	Does the organization have a written policy reg		handling of					
	violations, and enforcement of the conservation	easements it holds?	Yes No					
6	Staff and volunteer hours devoted to monitoring, ins							
	3,)						
7	Amount of expenses incurred in monitoring, inspect	ing, handling of violations, and enforcing conse	ervation easements during the year					
	3,	g,ag ore.auoe, aa oe.eg ooee	and the second s					
8	Does each conservation easement reported or	line 2d above satisfy the requirements of s	section 170(h)(4)(B)(i)					
9	In Part XIII, describe how the organization repo							
-	balance sheet, and include, if applicable, the te		•					
	organization's accounting for conservation east	_						
Par		ons of Art, Historical Treasures, or	Other Similar Assets					
ai	Complete if the organization answere		/ tooto!					
1a			e statement and balance sheet					
ıu	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.							
h	If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works							
D	of art, historical treasures, or other similar asse	•						
	service, provide the following amounts relating		occaron in fartherance of public					
	(i) Revenue included on Form 990, Part VIII, li		¢					
2	(ii) Assets included in Form 990, Part X							
2	If the organization received or held works of an		is for ilitaricial gain, provide the					
	following amounts required to be remarked as a	EACD ACC OEO rolotina to those items						
_	following amounts required to be reported under Revenue included on Form 990, Part VIII, line		\$					

Part	Organizations Maintaining C	collections of Ar	t, Histoı	rical Trea	asures, or C	Other	Similar Assets	(conti	nued)		
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).		_								
а	Public exhibition		d	Loan or	exchange pro	gram					
b	Scholarly research		e	Other							
С	Preservation for future generations	3									
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 so assets to be sold to raise funds rather t							Ye	es 🗌	No	
Part	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.										
	Is the organization an agent, trustee, cu	ustodian, or other ir	ntermedia	rv for cont	ributions or ot	her as	ssets not				
	included on Form 990, Part X?			-				☐ Ye	es 🗌	No	
b	If "Yes," explain the arrangement in Pa	rt XIII and complete	the follow	wing table.							
							A	mount			
С	Beginning balance					1	С			0	
d	Additions during the year					10					
е	Distributions during the year					10	-				
f	Ending balance					1	f			0	
2a	Did the organization include an amount	t on Form 990, Part	X, line 21	I, for escr	ow or custodia	al acco	ount liability?	Ye	es X	No	
b	If "Yes," explain the arrangement in Pa	rt XIII. Check here i	if the expl	anation ha	as been provid	led in	Part XIII				
Part	V Endowment Funds.		. •		\						
	Complete if the organization a	nswered "Yes" o	n Form 9	90, Part	IV, line 10.						
		(a) Current year	(b) Prid	or year	(c) Two years b	ack	(d) Three years back	(e) Fo	ur years	back	
1a	Beginning of year balance	95,479	V	102,806	95	,842	60,513				
b	Contributions					575	32,175				
С	Net investment earnings, gains,										
	and losses	8,448		-6,807	6	3,389	3,154	·			
d	Grants or scholarships							-			
е	Other expenditures for facilities	20,000									
	and programs	30,000		500				-			
Τ	Administrative expenses	73,927		520	100	0.000	OF 040				
g	End of year balance L		halanaa (l	95,479		2,806	95,842			0	
a	Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment %										
b	Permanent endowment	100%									
c		%									
	The percentages on lines 2a, 2b, and 2	c should equal 100)%.								
3a	Are there endowment funds not in the			n that are	held and adm	iniste	red for the				
	organization by:		Ü						Yes	No	
	(i) Unrelated organizations							3a(i)	Х		
	(ii) Related organizations							3a(ii)		Χ	
b	If "Yes" on line 3a(ii), are the related or	ganizations listed a	s required	on Sche	dule R?			3b			
4	Describe in Part XIII the intended uses	of the organization	's endowr	nent funds	S.						
Part	VI Land, Buildings, and Equipn	nent.									
	Complete if the organization a	nswered "Yes" o	n Form 9	90, Part	IV, line 11a.	See	Form 990, Part	X, line	10.		
	Description of property	(a) Cost or other basis (b) Cost or other basis (c) Ac) Accumulated	(d) Book value		9				
		(investm	ent)	(0	other)		depreciation				
1a	Land		0		0					0	
b	Buildings		0		0		0			0	
С	Leasehold improvements		0		0		0			0	
d	Equipment		0		3,001		0			3,001	
<u>e</u>	Other		0	Ľ 10	0		0			0	
ıotal	. Add lines 1a through 1e. (Column (d) m	nust equal ⊢orm 99	υ, Part X,	ııne 10c, (coiumn (B)) .					3,001	

SCHEDULE I (Form 990)

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,

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization Employer identification numbe Columbus Recreation and Parks Foundation 83-1310416 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and X Yes No Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form Part II 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation (book, FMV, appraisal, 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant or government (if applicable) grant cash assistance noncash assistance or assistance other) (1) City of Columbus Ohio Unrestricted 50 West Broad Street Columbus, OH 4 31-6400223 368,189 (4) (7) (8) (9) (10) (11) (12) 2 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2023

SCHEDULE O (Form 990)

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.

OMB No. 1545-0047

2023

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization Employer identification number 83-1310416 Columbus Recreation and Parks Foundation Form 990, Part VI, Section B, Line 11(b): Each board member has access to a copy of the Form 990 prior to its filing Form 990, Part VI, Section B, Line 12(c): During each year's January board meeting, each board member is required to state that they have no confilicts of interest, or to provide detailed information if they do have a conflict of interest Form 990, Part VI, Section B, Line 15: All compensation issues and decisions are decided by a majority vote of the full board of trustees, all of which are independent of any individual compensated as an officer or employee Form 990, Part VI, Section B, Line 19: The organization places its Form 990 on its website for viewing and download by anyone. In addition, the organization makes any of the documents described available upon request