GERMAN VILLAGE SOCIETY
BOARD OF TRUSTEES

MINUTES OF THE MEETING OF
August 10, 2015

Present: John Barr, Tim Bibler, Kelly Clark, Bill Curlis, Heidi Drake, Greg Gamier, Brittany Gibson, Joe Kurzer, Jeff McNealey and David Wible.

Staff and Guests: Darci Congrove, Gary Seman and Shiloh Todorov.

The meeting was called to order at 6:00 p.m. by Vice President Drake.

Inasmuch as our guest had not arrived, Vice President Drake moved immediately to the Secretary's Report.

MOTION: Approve the Minutes of the meeting July 13, 2015. [McNealey, Curlis]

Motion approved.

Mr. Curlis noted that the Board had conducted an electronic vote regarding a letter of support for the German Village Commission. He reported that the vote had received a majority 'yes,' but that policy required that the motion be affirmed at the next regularly scheduled meeting of the Board.

MOTION: To affirm the electronic vote of the Board to authorize the President to send a letter to the City of Columbus Board of Commission Appeals affirming the decision of the German Village Commission to deny

Parks and Public Spaces — Sara McNealey
written report — Carol Mullinax
Friends of Schiller — Katharine Moore
written report
Arboretum — Lindy Michael
written report

Community Quality of Life — Greg Gamier
GV Business Community — Marie Trudeau
written report
Long Range Planning — Josh Miller
written report
Art Committee — Nick Reshan
no report

Development — Dennis Brandon
Events
Haus und Garten — Brittany Gibson
written report
Monster Bash — Shiloh Todorov
oral report
Tea 43206 — Darci Congrove
oral
Village Valuables — Shiloh Todorov
no report
Art Crawl — Greg Gamier
oral report
Village Lights — Greg Gamier
no report
Membership — Susan Sutherland
no report
Corporate Outreach — Joe Kurzer
no report

Finance — Tim Bibler
Finance Committee — Tim Bibler
Motion: To accept for filing the annual IRS 990 report
Investment Committee — Tim Bibler
written report
Budget Committee — Shiloh Todorov
Next meeting: October, 2015

Governance — Dave Wible
Organizational Development — Dave Wible
written report

	Total
ASSETS	
Current Assets	
Bank Accounts	
Bank Accounts - Operations	
Operations Chase Checking - 6039	
Operations Chase Contingency - 4693	
Operations Fifth Third Checking - 5113 (deleted)	
Total Bank Accounts - Operations	**$ 199,917.43**
Board Designated Bank Accounts	
Board Designated Checking - 1362	
Bicentennial Fund	
Council of Historic Neighborhoods	
For the Good of the Neighborhood	
Frank Fetch Park/Maintenance	
Fund for Historic Preservation	
German Village Business Community	
Highfield Garden	
Historic Preservation Expert Restriction	
Huntington Garden/Maintenance	
Schiller Bloomin Fund	

German Village Society
Balance Sheet
As of July 31, 2015

	Total
Total Current Assets	$ 1,046,433.45
Fixed Assets	
Building 588 South Third Street	
Cost	
Depreciation	
Land	
Total Building 588 South Third Street	$ 213,554.31
Leasehold Improvements	
Depreciation	
Total Leasehold Improvements	$ 49,693.01
Office Equipment/Furniture/Paintings	
Cost	
Depreciation	
Total Office Equipment/Furniture/Paintings	$ 30,413.84
Office Furniture	
Cost	
Depreciaton	
Total Office Furniture	$ 0.00
Office Paintings	
Cost	
Total Office Paintings	$ 0.00
Total Fixed Assets	$ 293,661.16
TOTAL ASSETS	$ 1,340,094.61
LIABILITIES AND EQUITY	

GVS Finance Committee Report
July 29, 2015
Submitted By Tim Bibler

Attending the Meeting: Jim Nichols, Jeffrey McNealey, Darci Congrove, John Barry, Jim Gibboney, Dawn Lucas and Tim Bibler

Huntington Investment Report

Representative Jim Gibboney and Dawn Lucas from the Huntington submitted a written investment review regarding the three investment accounts that the Huntington manages for the Society. They reviewed the report with the committee and answered questions. At the next meeting it was decided to review examples of Balance Funds with allocations that are below and above our balance allocation. Also, it was decided to move the selected start date for our account funds from 10/1/2012 to 1/1/2013. The purpose of this change will allow a better comparison between the pesrisate ouri-1( )-1(1)-10(s</MCID 7 >>BDC 5.456 Tm (-1.1-2(a)4(t)-2(i)-2(

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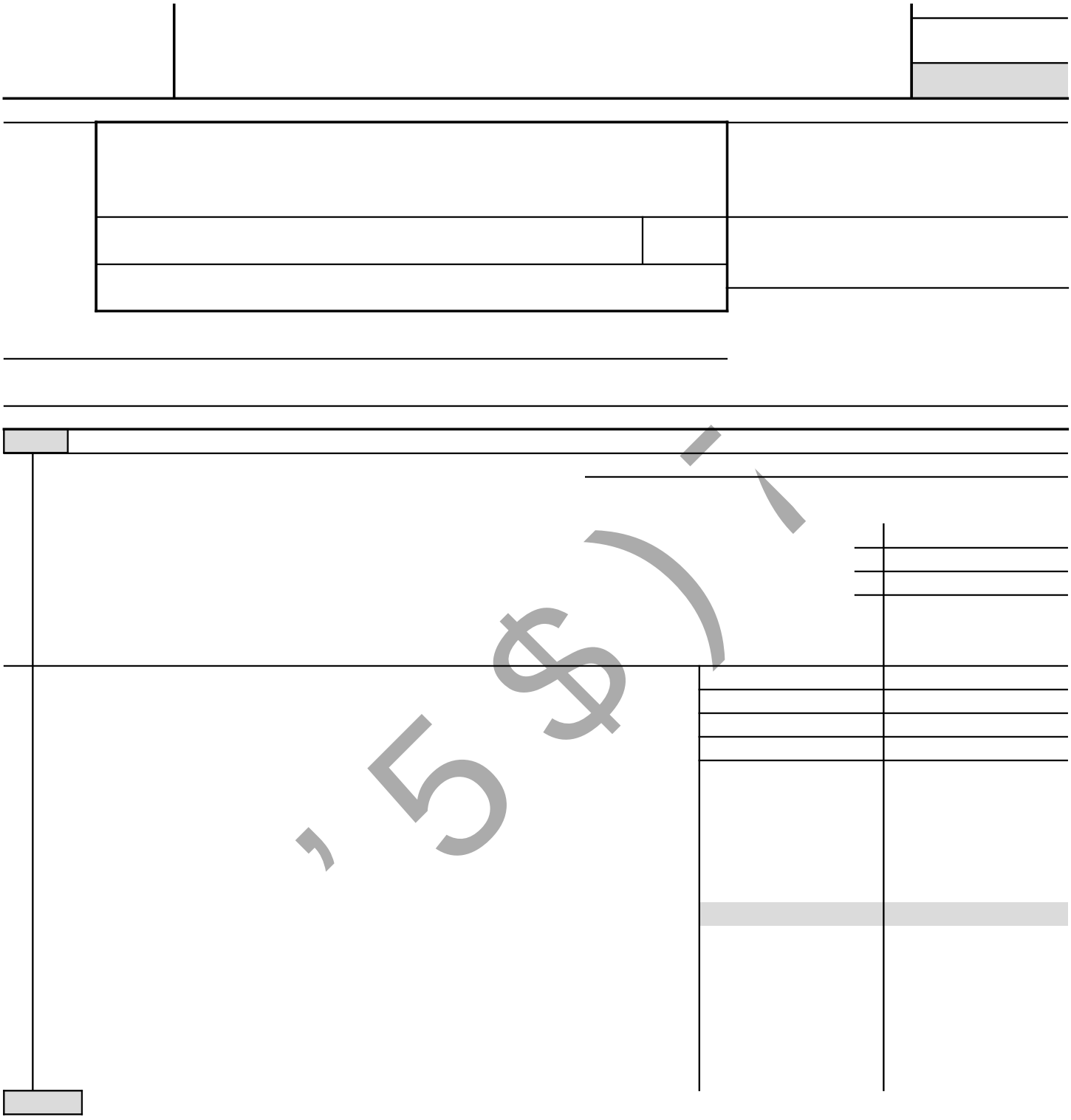


Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
THE GERMAN VILLAGE SOCIETY IS A NON-PROFIT CHARITABLE ASSOCIATION WHICH EXISTS TO PRESERVE AND PROTECT THE HISTORIC NEIGHBORHOOD OF GERMAN VILLAGE IN COLUMBUS, OHIO, AND TO EDUCATE THE PUBLIC ABOUT OHIO HISTORY AND HISTORIC PRESERVATION. THE ENTIRE GERMAN VILLAGE IS ON

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

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

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

4a (Code:) (Expenses $ 521,349. including grants of $) (Revenue $ 41,858.)
THE GERMAN VILLAGE SOCIETY MAINTAINS A VISITOR CENTER TO INFORM AND

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

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

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

4e Total program service expenses |

, 5 $) ' -

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

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable ~~~~~~~~~~	1a			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable ~~~~~~~~~~	1b			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c		
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? ~~~~~~~~~~		2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) ~~~~~~~~~~				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year? ~~~~~~~~~~		3a		
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O ~~~~~~~~~~		3b		
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		
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? ~~~~~~~~~~		5a		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? ~~~~~~~~~		5b		
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T? ~~~~~~~~~~		5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? ~~~~~~~~~~		6a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? ~~~~~~~~~~		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? ~~~~~~~~~~		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year ~~~~~~~~~~	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ~~~~~~~		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ~~~~~~~~~		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? ~		7g		
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		8		
9	Sponsoring organizations maintaining donor advised funds.				
a			9a		
b			9b		
10	Section 501(c)(7) organizations.				
a		10a			
b		10b			
11	Section 501(c)(12) organizations.				
a		11a			
b		11b			
12a	Section 4947(a)(1) non-exempt charitable trusts.		12a		
b		12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
a			13a		
	Note.				
b		13b			
c		13c			
14a			14a		
b	If "No," provide an explanation in Schedule O		14b		

For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year ~~~~~~	1a		
	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 in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent ~~~~~~	1b		
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		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? ~~~~~~~~~~~~~~~	3		
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? ~~~~~	4		
5	Did the organization become aware during the year of a significant diversion of the organization's assets? ~~~~~~~~~	5		
6	Did the organization have members or stockholders? ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	6		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? ~~~~~~	7a		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? ~~~~~~	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a		
b	Each committee with authority to act on behalf of the governing body?	8b		
9	~~~~~~~~~ If "Yes," provide the names and addresses in Schedule O	9		

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

			Yes	No
10a		10a		
b		10b		
11a		11a		
b				
12a	If "No," go to line 13	12a		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
c	If "Yes," describe in Schedule O how this was done	12c		
13		13		
14		14		
15				
a		15a		
b		15b		
16a		16a		
b		16b		

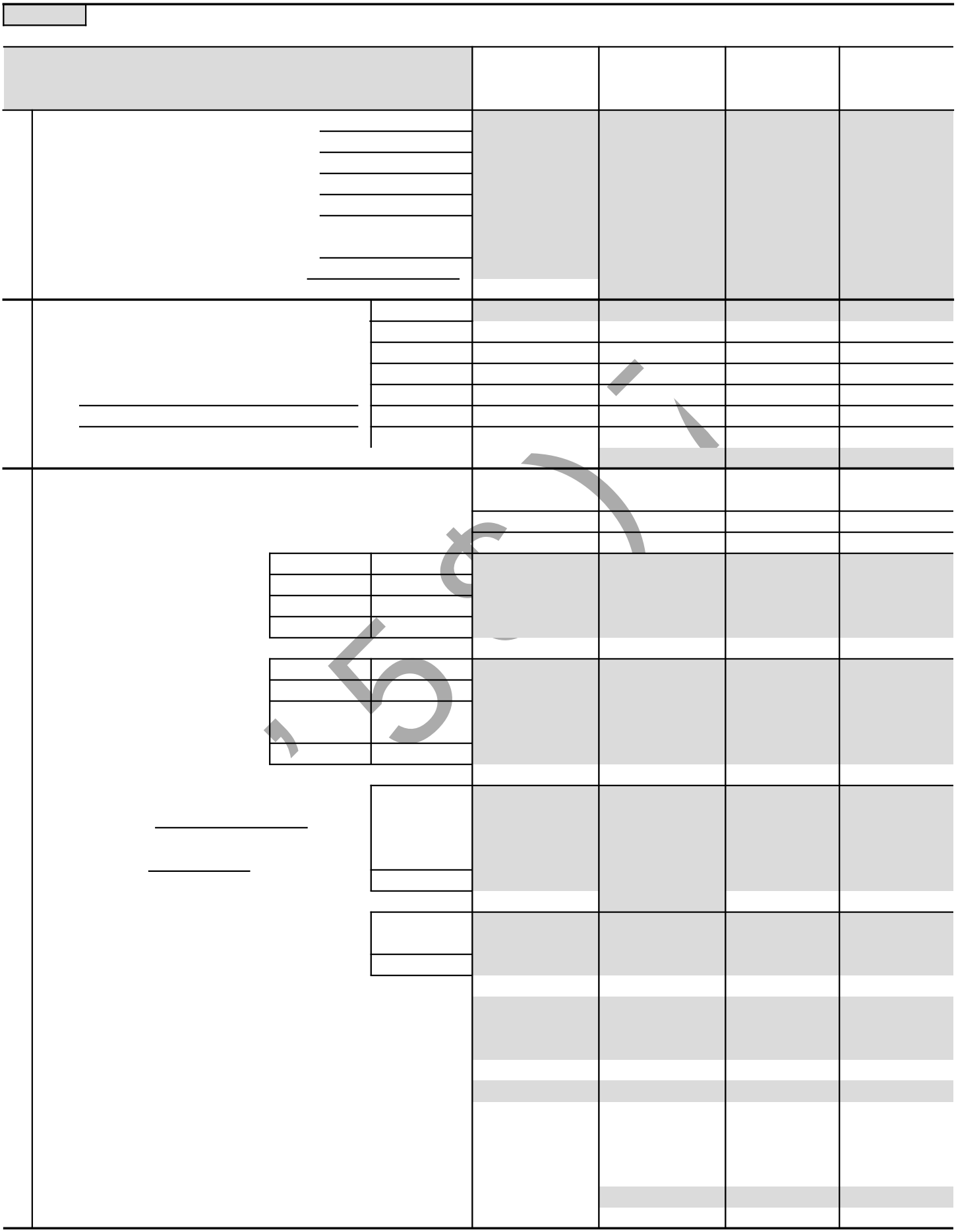
17

18 (explain in Schedule O)

19

20

		(do not check more than one box, unless person is both an officer and a director/trustee)								
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			



Part IXted,eLal, m curre TdceducatiEher expense454.~2Tjwag600 1w(~2Tj96s)LAG~~~21.6 -1

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22 ~~~~~~~				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 ~~~				
4 Benefits paid to or for members ~~~~~~~				
5 Compensation of current officers, directors, trustees, and key employees ~~~~~~~~				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) ~~				
7 Other salaries and wages ~~~~~~~~~~				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits ~~~~~~~~~~				
10 Payroll taxes ~~~~~~~~~~~~~~~~				
11 Fees for services (non-employees):				
a Management ~~~~~~~~~~~~~~~~				
b Legal ~~~~~~~~~~~~~~~~~~~				
c Accounting ~~~~~~~~~~~~~~~~				
d Lobbying ~~~~~~~~~~~~~~~~~				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees ~~~~~~~~				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion ~~~~~~~~~				
13 Office expenses~~~~~~~~~~~~~~~				
14 Information technology ~~~~~~~~~~				
15 Royalties ~~~~~~~~~~~~~~~~~				
16 Occupancy ~~~~~~~~~~~~~~~~				
17 Travel ~~~~~~~~~~~~~~~~~~				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings ~~				
20 Interest ~~~~~~~~~~~~~~~~~				
21 Payments to affiliates ~~~~~~~~~~~				
22 Depreciation, depletion, and amortization ~~				
23 Insurance ~~~~~~~~~~~~~~~~~				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a _____				
b _____				
c _____				
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e				
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ if following SOP 98-2 (ASC 958-720)				

1
2
3
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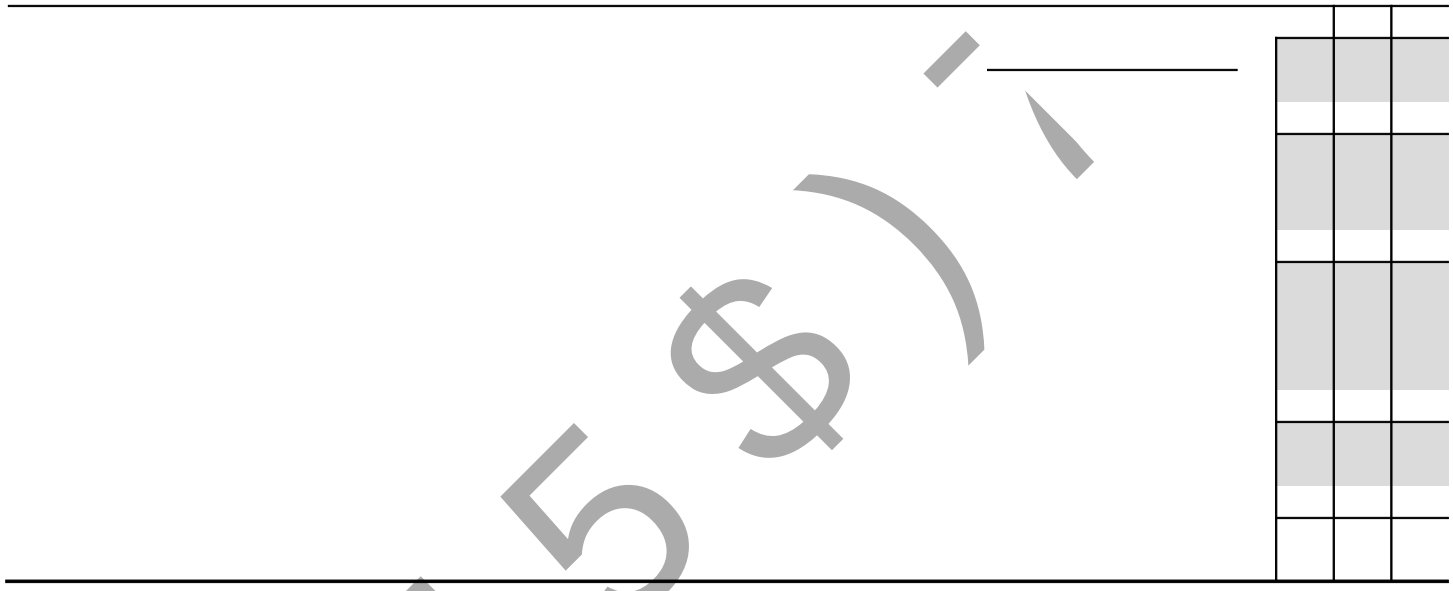

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.
| Information about Schedule A (Form 990 or 990-EZ) and its instructions is at

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

(All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)

3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).

4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). 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 government or governmental unit described in section 170(b)(1)(A)(v).

7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)

8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)

9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)

10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).

11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) orsection 509(a)(2) . Seesection 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.

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 Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.

c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.

d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.

e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type IIIment (seral,ani043AL635ation(s)

f

g

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see Instructions)	(vi) Amount of other support (see Instructions)
Total						

(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.)

Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
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.						

Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) 12

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

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	335,899.	332,985.	477,593.	285,390.	328,626.	1,760,493.
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	72,195.	90,423.	115,526.	267,975.	263,236.	809,355.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	408,094.	423,408.	593,119.	553,365.	591,862.	2,569,848.
7a Amounts included on lines 1, 2, and 3 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.
c Add lines 7a and 7b						0.
8 Public support (Subtract line 7c from line 6.)						2,569,848.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6	408,094.	423,408.	593,119.	553,365.	591,862.	2,569,848.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources				48,732.	37,334.	86,066.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b				48,732.	37,334.	86,066.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support (Add lines 9, 10c, 11, and 12.)	408,094.	423,408.	593,119.	602,097.	629,196.	2,655,914.

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	96.76	%
16 Public support percentage from 2013 Schedule A, Part III, line 15 ▪▪▪▪▪▪▪▪▪▪▪▪▪▪▪▪▪▪	16	97.91	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	3.24	%
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	2.09	%

19a 33 1/3% support tests - 2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▪▪▪▪▪▪▪▪▪▪ | X

b 33 1/3% support tests - 2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▪▪▪▪ |

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

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete

			Yes	No
1	If "No" describe in how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	If "Yes," explain in how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	If "Yes," answer (b) and (c) below.	3a		
b	If "Yes," describe in when and how the organization made the determination.	3b		
c	If "Yes," explain in what controls the organization put in place to ensure such use.	3c		
4a	If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	If "Yes," explain in what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only.	5b		
c	Substitutions only.	5c		
6	If "Yes," provide detail in	6		
7	If "Yes," complete Part I of Schedule L (Form 990).	7		
8	If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	If "Yes," provide detail in	9a		
b	If "Yes," provide detail in	9b		
c	If "Yes," provide detail in	9c		
10a	If "Yes," answer (b) below.	10a		
b	(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):

a ☐ The organization satisfied the Activities Test. Complete line 2 below.

b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.

c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

			Yes	No
2	Activities Test. Answer (a) and (b) below.			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

1 See instructions.

Section A - Adjusted Net Income			
1	1		
2	2		
3	3		
4	4		
5	5		
6	6		
7	7		
8 Adjusted Net Income	8		
Section B - Minimum Asset Amount			
1			
a	1a		
b	1b		
c	1c		
d Total	1d		
e Discount Part VI			
2	2		
3	3		
4	4		
5	5		
6	6		
7	7		
8 Minimum Asset Amount	8		
Section C - Distributable Amount			
1			

SectionT3B 3
v 3*d (Minimu31 003)Tj 0 -24 TD (4)Tj 0 -122inimum Asset Amount -52537 0.8- (a)Tj Schedul Am (Form 990 or 990-EZ).48 7TT0 6 T2 36.5 -392Tj 0 0.Form 990 or 990

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2014:			
a			
b			
c			
d			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2014 from Section D, line 7: $			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2015. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c			
d Excess from 2013			
e Excess from 2014			

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(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

| Attach to Form 990, Form 990-EZ, or Form 990-PF.
| Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at .

OMB No. 1545-0047

Name of the organization

Employer identification number

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 or 990-EZ), 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, 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

exclusively

General Rule

nonexclusively

Caution.
must

423451
11-05-14

Name of organization: GERMAN VILLAGE SOCIETY

Employer identification number: 31-0969645

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DOROTHY T. & MYRON T. SEIFERT CHARITABLE TRUST P.O. BOX 94651 COLUMBUS, OH 43206	$ 15,005.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
2	GERMAN VILLAGE GUESTHOUSE 756 JAEGER STREET COLUMBUS, OH 43206	$ 7,020.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
3	BARCELONA 263 EAST WHITTIIER STREET COLUMBUS, OH 43206	$ 7,100.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
4	G MICHAEL'S BISTRO & BAR 595 SOUTH 3RD STREET COLUMBUS, OH 43215	$ 6,000.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
5	TITTICA MITCHELL 588 SOUTH 3RD STREET COLUMBUS, OH 43215	$ 30,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
6	10TV 770 TWIN RIVERS DRIVE COLUMBUS, OH 43215	$ 25,350.	Person Payroll Noncash X (Complete Part II for noncash contributions.)

Name of organization	Employer identification number

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash(b)(b) Name, address, and ZIP + 4

Name of organization: GERMAN VILLAGE SOCIETY

Employer identification number: 31-0969645

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	TOM DAILEY 749 MOHAWK STREET COLUMBUS, OH 43206	$ 6,725.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
14	JOHN & ANGELA PETRO 231 EAST SYCAMORE STREET COLUMBUS, OH 43206	$ 5,986.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
15	THE BOOK LOFT 631 SOUTH 3RD STREET COLUMBUS, OH 43206	$ 5,900.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
16	VUTECH & RUFF 177 EAST BECK STREET, 2ND FLOOR COLUMBUS, OH 43206	$ 5,425.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
17	HARVEST PIZZERIA 495 SOUTH 4TH STREET COLUMBUS, OH 43206	$ 5,000.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
18	HARVEST PIZZERIA 495 SOUTH 4TH STREET COLUMBUS, OH 43206	$ 150.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization | Employer identification number

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		$	Person Payroll Noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash

Name of organization	Employer identification number
GERMAN VILLAGE SOCIETY	31-0969645

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	BARCELONA 263 EAST WHITTIIER STREET COLUMBUS, OH 43206	$ 2,000.	X Person Payroll Noncash (Complete Part II for noncash contributions.)
		$	Person Payroll Noncash (Complete Part II for noncash contributions.)
		$	Person Payroll Noncash (Complete Part II for noncash contributions.)
		$	Person Payroll Noncash (Complete Part II for noncash contributions.)
		$	Person Payroll Noncash (Complete Part II for noncash contributions.)
		$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
GERMAN VILLAGE SOCIETY	31-0969645

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
14	HAUS & GARTEN TOUR	$ 5,986.	06/28/14
17	HAUS & GARTEN TOUR	$ 5,000.	06/28/14
19	HAUS & GARTEN TOUR	$ 4,165.	06/28/14
21	HAUS & GARTEN TOUR	$ 5,000.	06/28/14
22	HAUS & GARTEN TOUR	$ 5,000.	06/28/14
		$	

completing Part III, enter the total of exclusively religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this info. once.)

For organizations
title, etc., contributions of $1,toizations

OMB No. 1545-0047

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a

(continued)

3 Using the organization's acquisition, accession, and other records, checq

a
b
c
4
5

d
e

Yes No

1a

Yes No

b

c
d
e
f

1c	
1d	
1e	
1f	

2a
b

Yes No

	(a)	(b)	(c) Two years back	(d) Three years back	(e) Four years back
1a					
b					
c					
d					
e					
f					
g					

2
a
b
c

3a

(i)
(ii)
b

	Yes	No
3a(i)		
3a(ii)		
3b		

4

	(a)	(b)	(c)	(d)
1a				
b				
c				
d				
e				
Total. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives ~~~~~~~~~~~~~~~~		
(2) Closely-held equity interests ~~~~~~~~~~~~		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▸		

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

	(a) Description	(b) Book value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▸		

Part X Other Liabilities.

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

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	PREPAID MEMBERSHIP DUES	39,750.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.) ▸	39,750.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

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

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

1	Total revenue, gains, and other support per audited financial statements			1	756,605.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	8,814.		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	97,404.		
e	Add lines 2a through 2d			2e	106,218.
3	Subtract line 2e from line 1			3	650,387.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	650,387.

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

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

1	Total expenses and losses per audited financial statements			1	683,692.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	97,404.		
e	Add lines 2a through 2d			2e	97,404.
3	Subtract line 2e from line 1			3	586,288.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	586,288.

Part XIII Supplemental Information.

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

PART X, LINE 2:

THE SOCIETY IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND IS CLASSIFIED BY THE INTERNAL REVENUE SERVICE AS OTHER THAN A PRIVATE FOUNDAITON. THERE ARE THREE OPEN TAX YEARS AS OF THE DATE OF THE FINANCIAL STATEMENTS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

FUNDRAISING EXPENSES NETTED AGAINST FUNDRAISING REVENUE 97,404.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

FUNDRAISING EXPENSES NETTED AGAINST FUNDRAISING REVENUE 97,404.

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SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.

| Attach to Form 990 or Form 990-EZ.

| Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization
GERMAN VILLAGE SOCIETY

Employer identification number
31-0969645

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a Mail solicitations
b Internet and email solicitations
c Phone solicitations
d In-person solicitations
e Solicitation of non-government grants
f Solicitation of government grants
g Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	(iii) No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
Total ••••••••••••••••••••••••••••••••••• |						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

15 SP 1

Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

		(a) Event #1 (event type)	(b) Event #2 (event type)	(c) Other events (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				
	11 Net income summary. Subtract line 10 from line 3, column (d)				

Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	Yes____ % No	Yes____ % No	Yes____ % No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Yes No

b _____

11 Does the organization conduct gaming activities with nonmembers? ~~~~~~~~~~~~~~~~~~~~~~~~~~~ Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ~~~~~~ Yes No

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility ~~~~~~ 13a %

b An outside facility ~~~~~~ 13b %

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name | _____

Address | _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ~~~~~~ Yes No

b If "Yes," enter the amount of gaming revenue received by the organization | $ _____ and the amount of gaming revenue retained by the third party | $ _____ .

c If "Yes," enter name and address of the third party:

Name | _____

Address | _____

16 Gaming manager information:

Name | _____

Gaming manager compensation | $ _____

Description of services provided | _____

Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ~~~~~~ Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year | $

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990.
Information about Schedule M (Form 990) and its instructions is at

Open To Public Inspection

Employer identification number

	(a)	(b)	(c)	(d)
1				

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

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
| Attach to Form 990 or 990-EZ.
| Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047
2014
Open to Public Inspection

Name of the organization
GERMAN VILLAGE SOCIETY

Employer identification number
31-0969645

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

PROTECT THE HISTORIC NEIGHBORHOOD OF GERMAN VILLAGE IN COLUMBUS, OHIO, AND TO EDUCATE THE PUBLIC ABOUT OHIO HISTORY AND HISTORIC PRESERVATION. THE ENTIRE GERMAN VILLAGE IS ON THE NATIONAL REGISTER OF HISTORIC PLACES. THE SOCIETY IS DEDICATED TO RETAINING THE CHARACTER AND DISTINCTION OF THE PAST, WHILE CREATING A THRIVING AND CONTEMPORARY COMMUNITY.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE NATIONAL REGISTER OF HISTORIC PLACES. THE SOCIETY IS DEDICATED TO RETAINING THE CHARACTER AND DISTINCTION OF THE PAST, WHILE CREATING A THRIVING AND CONTEMPORARY COMMUNITY.

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

MULTIPLE OTHER NONPROFIT ASSOCIATIONS TO BENEFIT THE COMMUNITY, INCLUDING THE COLUMBUS PUBLIC SCHOOL SYSTEM, THE ACTORS' THEATER, THE

Name of the organization: GERMAN VILLAGE SOCIETY | Employer identification number: 31-0969645

ALSO SERVE ON THE FINANCE COMMITTEE. THEY REVIEW AND APPROVE THE FORM 990 FOR FINAL FILING.

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

BOARD MEMBERS DISCUSS CONFLICTS OF INTEREST POLICY AT BOARD MEETING AT THE END OF THE YEAR AS PLANNING FOR THE UPCOMING YEAR IS DONE. BOARD MEMBERS ARE REQUIRED TO COMPLETE CONFLICT STATEMENTS AND ARE REQUIRED TO UPDATE THROUGHOUT THE YEAR. BOARD MEETINGS ARE PERIODICALLY USED TO UPDATE/DISCUSS POTENTIAL CONFLICTS.

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

THE FINANCE COMMITTEE, AS WELL AS THE EXECUTIVE COMMITTEE, REVIEWS AND SETS PAYROLL SCALES FOR THE EXECUTIVE DIRECTOR. THE COMMITTEE WILL ALSO MAKE RECOMMENDATIONS FOR OTHER STAFF PAY SCALES. THE COMMITTEES UTILIZE MEMBER EXPERIENCE AND SALARY SURVEYS TO ASSIST IN DETERMINING PAY SCALES FOR THE ORGANIZATION.

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

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICTS OF INTERST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST. THE ORGANIZATION ALSO HOLDS AN ANNUAL MEETING TO UPDATE MEMBERS.

FORM 990, PART IX, LINE 11G, OTHER FEES:

CONSULTING FEES :

PROGRAM SERVICE EXPENSES	83,826.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	83,826.

Name of the organization GERMAN VILLAGE SOCIETY

Employer identification number 31-0969645

TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 83,826.

FORM 990, PART XII, LINE 1:

THE ORGANIZATION DID NOT CHANGE ITS ACCOUNTING METHOD FOR PREPARING THE FORM 990.

Form
(Rev. January 2014)

Department of the Treasury
Internal Revenue Service

| File a separate application for each return.
| Information about Form 8868 and its instructions is at .

OMB No. 1545-1709

¥ If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box ~~~~~~~~~~~~~~~~~~ |
¥ If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).
you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing . You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ~~~~~~ |

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

Type or print	Name of exempt organization or other filer, see instructions.	Enter filer's identifying number Employer identification number (EIN) or
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions.	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	

Enter the Return code for the return that this application is for (file a separate application for each return) ~~~~~~~~~~~~~~~~~~

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

¥ The books are in the care of | _____
Telephone No. | _____ Fax No. | _____
¥ If the organization does not have an office or place of business in the United States, check this box ~~~~~~~~~~~~~~~~~~ |
¥ If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box | . If it is for part of the group, check this box | and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until _____, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
| calendar year _____ or
| tax year beginning _____, and ending _____.

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

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

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

	Actual	Budget	Actual	Budget	Actual	Budget	Actual	Budget	Actual	Budget	Actual	Budget	Actual	Budget	Actual	Budget	Actual	Budget	Actual	Budget	Actual	Budget	Actual	Budget	Actual	Budget	Actual	Budget
Income																												
Admission/Event Income																												
Advertising Income																												
Contributions																												
In-Kind Donations																												
Interest Income																												
Membership Dues - GVS													‘ 0 V			C ‘<¯l							‘ 0		fi^		S V 0 0		

	Actual	Budget	over Budget	% of Budget		Actual	Budget	over Budget	% of Budget
Income									
Admission/Event Income									
Advertising Income									
Contributions									
In-Kind Donations									

	Date	Transaction Type	Num
Equipment Rental			
		& K H F N	
		& K H F N	
		& K H F N	
		& K H F N	
		& K H F N	
		& K H F N	
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		& K H F N	
		& K H F N	
		& K H F N	
Total for Equipment Rental			
TOTAL			

Name	Memo/Description	Account
3LWQH\ %RZHV *OREDO)LQDQFLDO	0HWHU OHDVH &RSLHV	(TXLSPHQW 5HQWDO 0RGHUQ /HDVLQJ

	Split			Amount
%DQN $FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQJ
%DQN $FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQJ
%DQN $FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQJ
%DQN $FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQJ
%DQN $FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQJ
%DQN $FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQJ
%DQN $FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQJ
%DQN $FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQJ
%DQN $FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQJ
%DQN $FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQJ
%DQN $FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQJ
%DQN $FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQJ
%DQN $FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQJ
%DQN $FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQJ
%DQN $FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQJ
%DQN $FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQJ
%DQN $FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQJ
%DQN $FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQJ
				-$ 14,584.77
				-$ 14,584.77

German Village Society
Financial Highlights
August 10, 2015 Trustee Meeting
Tim Bibler, Treasurer

This report attempts to highlight certain line items of the attached financial reports and other financial activity that is presented to the GVS board. It is not meant to summarize the reports, but rather represent notations of the treasurer or staff because of their impact upon the financials.

	Date	Transaction Type	Num
Dues & Memberships			
		& K H F N	
		& K H F N	
		& K H F N	
		& K H F N	
		& K H F N	
		& K H F N	
		& K H F N	
		& K H F N	
		& K H F N	
Total for Dues & Memberships			
TOTAL			

German Village Society
Transaction Report
January - December 2015

Memo/Description	Account
*URXS 7RXU FR RS LQYHVWPHQW	'XHV 0HPEHUVKLSV
$QQXDO 0HPHEHUVKLS	'XHV 0HPEHUVK
2KLR /RFDO +LVWRU\ $OOLDQFH	'XHV 0HPEHUVK
2KLR +LVW &RQQHFWLRQ	'XHV 0HPEHUVKLSV
$PHULFDQ $VVRFLDWLRQ IRU 6WDWH DQG /RFDO +LVWRU\ 0HPEHUVKLS 'XHV	'XHV 0HPEHUVKLSV
$PHULFDQ $VVRFLDWLRQ	'XHV 0HPEHUVK
1DWLRQDO 7UXVW 'XHV	'XHV 0HPEHUVKLSV
$QQXDO 'XHV	'XHV 0HPEHUVK
0HPEHUVKLS	'XHV 0HPEHUVK

		Split			Amount
%DQN	$FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQJ
%DQN	$FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQ\
%DQN	$FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQ\
%DQN	$FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQJ
%DQN	$FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQ\
%DQN	$FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQ\
%DQN	$FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQJ
%DQN	$FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQ\
%DQN	$FFRXQWV	2SHUDWLRQV	2SHUDWLRQV	&KDVH	&KHFNLQ\
					-$ 3,455.00
					-$ 3,455.00

	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual
Income																		
Admission/Event Income																		
Advertising Income																		
Contributions																		
Grants																		
In-Kind Donations																		
Interest Income																		
Membership Dues -GVBC																		
Merchandise Income																		
Miscellaneous Income																		
Rental Income																		
Sponsorship																		
Total Income	$ 6,370.69	$ 12,122.20	$ 58,446.19	$ 1,000.00	$ 0.00	$ 2,613.49	$ 7,220.00	$ 2,545.79	$ 250.00	$ 0.00	$ 6,005.00	$ 8,532.17	$ 2,000.00	$ 500.00	$ 3,965.00	$ 500.00	$ 2,085.30	$ 114,155.83
Gross Profit	$ 6,370.69	$ 12,122.20	$ 58,446.19	$ 1,000.00	$ 0.00	$ 2,613.49	$ 7,220.00	$ 2,545.79	$ 250.00	$ 0.00	$ 6,005.00	$ 8,532.17	$ 2,000.00	$ 500.00	$ 3,965.00	$ 500.00	$ 2,085.30	$ 114,155.83
Expenses																		
Advertising																		
Bank/Credit Card Fees																		
Consulting Fees																		
Equipment Rental																		
Food/Beverages																		
In-Kind Expense																		
License/Fees/Permits																		
Meeting Haus Groundskeeping																		
Miscellaneous Expense																		
Payroll Taxes																		
Postage																		
Printing/Signage																		
Repairs & Maintenance																		
Salaries/Wages																		
Security																		
Supplies																		
Transportation/Towing																		
Total Expenses	$ 0.00	$ 13,258.63	$ 35,121.64	$ 697.00	$ 0.00	$ 671.95	$ 4,115.58	$ 661.08	$ 900.00	$ 2,775.00	$ 1,208.39	$ 21,582.89	$ 1,753.75	$ 0.00	$ 3,885.11	$ 0.00	$ 3,043.25	$ 89,674.27
Net Operating Income	$ 6,370.69	-$ 1,136.43	$ 23,324.55	$ 303.00	$ 0.00	$ 1,941.54	$ 3,104.42	$ 1,884.71	-$ 650.00	-$ 2,775.00	$ 4,796.61	-$ 13,050.72	$ 246.25	$ 500.00	$ 79.89	$ 500.00	-$ 957.95	$ 24,481.56
Other Income																		
Transfers In																		
Transfers out																		
Total Other Income	-$ 1,750.00	$ 0.00	$ 0.00	$ 0.00	-$ 17,546.00	$ 0.00	$ 0.00	$ 0.00	$ 0.00	$ 0.00	$ 0.00	$ 0.00	$ 0.00	$ 0.00	$ 0.00	$ 0.00	-$ 800.00	-$ 20,096.00
Other Expenses																		
Deferred Gain/Loss Investments																		

responsibilities are typically separated. A suggestion would be to have an individual (possibly from the finance committee or otherwise having the appropriate knowledge) periodically review bank reconciliations for unusual items and agreement to the books. (Note: Although the Society has an annual audit performed by independent auditors, the audit should not be considered as a means to find errors if any.

Further, evidence of proper stewardship of assets is a year round endeavor, not just by having an annual audit.

- Other than various inquiries, no observations of documented processes for fundraising events (referred to earlier) were performed.

- A separate narrative was prepared titled "Documentation if Financial Processes" to satisfy the second objective referred to at the beginning of this narrative. tf 0.224 0 Td (")Tj 2.76

Civic Relations Committee Nelson Genshaft, Chair

I am planning to have a CR Committee meeting in September to review a number of things:

1.

Parks, Public Spaces and Community Events

Minutes of the July 2 , 2015 meeting

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Actors' Theatre

&DUROLQH UHSRUWHG WKDW WKH FRQWLQXLQJ UDLQV DUH KD RQ $FWRUV¶ 7KHDWHU DWWHQGDQFH KDYH KDG WR HLWKHU HQWLUH RU PDQFHV KDYH KDG WR HLWKHU $SSUR[LPDWHO\ RQH WKH FRPSDQ\¶V EXGJHW

German Village Garten Club/Friends of Frank Fetch

-HUU\ *OLFN UHSRUWHG &KDUOHV¶ QH[W ELJ 7XHVGD\ WKH *DUGHQV RQ 6XQGD\ LQ HLWKHU FOR 3DUN RU DFWXDOO\ LQ WKH SDUN 7KH QH[W ELJ SURMHFW $QQLYHUVDU\ RI WKH *DUWHQ &OXE LV WKH 3DUN 7KH JURXS LV FXUUHQWO\ UHYLHZLQJ GLIIHUHQW WD SD\ IRU RQH WDEOH DQG WR SD\ IRU DQG LQVWDOO WKH FR UHVW

7KH ILUVW WZR WDEOHV FRQFHUW ZHQW ZHOO)HOORZ 0DQ S DQG EOXHJUDVV WRU\ DSSUHFLDWLYH FURZG 7KH EHHKLYH KDV GLIIHUHQW DUHD RI WKH SDUN VLQFH WKH RULJLQDO DUHD PDGH WR UHSDLU WKH WZR UHFHQW DFWV RI YDQGDOLVP L

German Village Society

0DUN :HLVV UHSRUWHG RQ WKH XSFRPLQJ *HUPDQ 9LOODJH ZKLFK LV EHLQJ KHOG RQ -XO\ IURP GSTP HVQRGDUSHP 6R IDU SDUWLFLSDWLQJ DV ZHOO DV WZR EUHZLQJ FRPSDQLHV

7KH +DXV XQG *DUWHQ 7RXU ZHQW YHU\ ZHOO 7KLHQWXUQR SDUWLFLSDWHG WKH JUHDW ZHDWKHU 7KH QLÜÀRQWUWL ðO FRPLQJ LQ

FUN Bunch

0 L N & R U Q H O L V Z D V X Q D E O H W R D W W H Q G E X W Y L D H P D L O L
V R I W E D O O J D P H * E & X S F D N H G E \ & X S F D N H & O D U
2 K L R 9 L O O D J H P E L O O E H K H O G

To: Our cohorts on the Parks, Public Spaces, and Community Events committee

From: Friends of Schiller Park

Date: 2 July 2015

The burl bowl display and the woodturning demonstration at Marketplatz were both tremendous successes last Sunday. The 37 available burl bowls are being offered to the "close friends" of Friends of Schiller Park first; those who have watered trees, hosted events, and contributed resources to the tree fund. Any remaining burl bowls and an additional 20 bowls made from the trunk of the tree will be offered to the public later this summer. We are trying to coordinate an open house/sale when Lindy Michael is in town, and the trunk bowls have dried enough to be finished, and the Meeting Haus is available. Details to be confirmed as they fall in place.

The LONG AWAITED stone for the replacement project at the Umbrella Girl fountain came in, and was deemed unacceptable by McKay Lodge and returned. They said it had pronounced dark veins that were not in any of the samples we were given. We are back to the drawing board…where we have been hanging out for several years!

I got a quote for an irrigation system at the Welcome Garden at Reinhard and Jaeger, but then had a conversation with one of the Forestry staff members who was opposed to the project. My next step is to engage Mollie O'Donnell, the head of planning, in this conversation. We need a solution for watering the Recreation Center drive and Reinhard & Jaeger beds…but want to choose the right one.

The Friends of Schiller Park sponsored a Schiller installation of the Recreation and Parks Department's Treemendous public art project. They are trying to follow up on the success of the Tiny Doors program and our enchanted castle is just wonderful! The rest of the "game"…finding, tuning, searching out houses…seems a bit convoluted, but Schiller Park has a fun summer treat and we love working with Kenny Cramer, the artist. Kenny is working on a Christmas project with us and I have a shout out: does anyone know where we can get a "retired" postbox? The kind you see on the street corner. The post office worries about people setting up a fake drop and stealing mail…so they don't make them available.

My 4th of July weekend project is to get a final tally on the 2015 Blooming Fund Campaign and initiate payment to the Garten Club. Safe to say it was a big success and will cover our gardening expenses for the year.

Friends of Schiller Park Report

Katharine Moore

August 6, 2015

The Welcome Gardens have benefited from the crazy amount of rain…they look so beautiful this summer. Makes it easy to put off the complicated issue of how to solve the watering issues at the beds that do not have irrigation systems. I checked in with the Planning office at Recreation and Parks, they have no information on the status of the ADA project on the southeast corner/rec center entrance.

The stone that was ordered for the Umbrella Girl area was turned back by McKay Lodge upon arrival…they said it didn't look anything like the samples. Awaiting new samples, new options, hopefully in this lifetime.

We are trying to get the 5 benches we have in storage installed, but the quote for concrete pads came back at TRIPLE the price the same contractor (the City's preferred vendor) gave us 4 years ago. I am pressing for a solution.

The steering committees for both of our October 30 fundraising events are gearing up. Tequila and fashion…what's not to love?! Jeff Wolfe will host the Kindred Spirits gathering at his home, and Girl Friends of Schiller Park will be at the Kitchen. Tickets will go on sale the first of September.

Burl Bowls are now on sale to the public, after a quiet offering to the current FOS volunteers. I have had them on display at my office, as the space offers up lots of table top real estate. Our plan had to been to have an open house and sale at the Meeting Haus once the bowls from the plaining mill (not the burl) had dried…but timing ran us too close to the Tea, so we have scheduled the Sunday event for November 15. We will also show "Following the Ninth" that afternoon; it is a documentary about Beethoven's 9th Symphony, for which he utilized Schiller's Ode to Joy as lyrics. It is a really lovely film and the showing is made possible by a grant from the Puffin Foundation.

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'HQQLV %UDQGRQ
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Organizational Development Committee

Board Report – August 10, 2015 Meeting

GVBC

The Art Crawl numbers haven't been audited yet, but the rough numbers are that we cleared around $20,000 on the event with around 1,000 people in attendance. All this in 80+ degree heat.

Artists had to be turned away because we had too many apply than we had room for. Being a juried event, this adds to the prestige of Art Crawl going into the future. An informal survey of the artists proved that they were all pleased with the event and were successful in selling their pieces. One mentioned how she loved GV crowds in the way that they understand the value of art.

We re-arranged the food process by having checks on the tickets for each restaurant. Some vendors ran out, but not all, and it was later into the evening when they started to run out. We did not run out of wine all evening, keeping lots of people happy.

Jessica and Angela of Two Caterers took charge of the food for the first time this year, and their professional expertise shined throughout the evening. They are surveying restaurants to see how the evening went for them and to ask for advice for the future. We are very grateful to the participation of all the restaurants.

We had to scramble at the last minute to find workers to disassemble the tents and do general clean up.

German Village Society
Haus und Garten
2015 Final Numbers

	2014 Actual	2015 Budget	2015 Final
,QFRPH			
$GPLVVLRQV			
8EHUIUHXQG :XQGHUNLQG			
0DUNHWSODW] +DXV XQG *DUWHQ			
&RFNWDLORXQGRIHVVLRQDOV			
3UH7RXU $GPLVVLRQV			
$QKDQJHU 3UH7RXU 3DWURQV			
3URJUDP $G 6DOHV			
5DIIOH			
6SRQVRUVKLS			
*ROI &DUW 5HQWDOV			
:DWHU 6DOHV			
%LHU *DUWHQ 6DOHV			
:DWHUFRORU &RPSHWLRQ ,QFRPH			
0LVFHOODQHRXV ,QFRPH			
7RWDO +DXV XQG *DUWHQ ,QFRPH			
([SHQVHV			
3URILW EHIRUH (YHQW &RRUGLQDWRU			
(YHQW &RRUGLQDWRU			
1HW 3URILW			
$GPLVVLRQV 'HWDLO			
3UH6DOH RQOLQH 0WJ +DXV			
*LDQW (DJOH			
6XQGD\ VDOHV			
$XWREDKQ WLFNHWV			
7RWDO			

Historic Preservation Committee Report

July 16, 2015 Meeting

Strategic Plan Initiatives

Sidewalk strategy –

Goal for completion of the survey is for all survey forms to have been submitted by the September meeting of the Preservation Committee. Completed surveys will be turned in at the August meeting so Sarah and team can start the data entry.

Discussion of how this survey supports the broader improvement projects especially related to curb needs.

District Re-survey – Sarah's intern has completed the address verification step.

Oral Histories – applying for an Ohio History Connection History Fund grant.

Digitization Update – did not receive grant funding from OH Humanities or Columbus Foundation but did get good feedback from Columbus Foundation regarding the Legacy Fund. Will also be applying for a History Fund grant for digitization.

TEA 43206 – The activities on the Friday night before the event will include displays presenting the results of the signage study, tours and a John Clark book signing.

GV Commission Highlights –The variance requested by Rooster's was discussed as well as the work 0.004 Tc 06t go-1(i)-3(

August Board Report – Mark Weiss

Social Media & Neighbors4Neighbors A/B Testing:

I have been working with our two interns (Michael Martinelli and Erin O'Neil) collecting data from our A/B, multi-variate testing with Neighbors4Neighbors and our social media platforms. While it won't be until the end of August that we've wrapped up the social media testing, patterns are beginning to develop that suggest we get better engagement during certain times of the day. The initial results are showing spikes in engagement during the 2-3 p.m. time frame, but right now those results are still inconclusive.

From July 16-August 6 we have been testing two versions of the N4N newsletter. Version A is our regular long-form digest and Version B is a shorter, image- and link-driven digest that encourages readers to choose the news they care about most. From previous surveys, we still know that neighbors want updates on events and what's current in the Village most and so we structured a template that prominently features those demands at the top of our newsletter, the top third anyways. We have found from initial survey results during this testing that readers appreciate the brief articles and the ability to open what they truly care about. The new test version is not only shorter in length, but the template is very uniform with only the need-to-know basics of any news topic, encouraging click throughs to our website.

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mobile devices. eRoots actually commended us on the communications work we've done so far as part of their recommendation was going to be a study of who are audience is and what are goals should be. Our Communications Task Force has done this and we're a step ahead on that front. While eRoots will be working on a "visioning project" to help us with define our RFP, we are working on a 'Must-Have' list that will feature absolutes that our users are demanding and obviously mobile optimization will be at the top. This must-have list, followed by broader goals will lead to recommendations from eRoots. If you're following along at home our communications goal and approach has been:

1) Evaluate (That what we started in February)
2) Discuss How To Address It (That's what we've started in May/June, and continue through present with eRoots)
3) Measure (A/B testing, then more measurement to come once changes have been made)
4) Answer the question: Did we achieve it?