

Form 1023 Checklist

(Revised June 2006)

Application for Recognition of Exemption under Section 501(c)(3) of the Internal Revenue Code

Note. Retain a copy of the completed Form 1023 in your permanent records. Refer to the General Instructions regarding Public Inspection of approved applications.

Check each box to finish your application (Form 1023). Send this completed Checklist with your filled-in application. If you have not answered all the items below, your application may be returned to you as incomplete.

- Assemble the application and materials in this order:
 - Form 1023 Checklist
 - Form 2848, *Power of Attorney and Declaration of Representative* (if filing) N/A
 - Form 8821, *Tax Information Authorization* (if filing) N/A
 - Expedite request (if requesting) N/A
 - Application (Form 1023 and Schedules A through H, as required) SEE BELOW
 - Articles of organization EXHIBIT A
 - Amendments to articles of organization in chronological order EXHIBIT B
 - Bylaws or other rules of operation and amendments EXHIBIT C
 - Documentation of nondiscriminatory policy for schools, as required by Schedule B N/A
 - Form 5768, *Election/Revocation of Election by an Eligible Section 501(c)(3) Organization To Make Expenditures To Influence Legislation* (if filing) N/A
 - All other attachments, including explanations, financial data, and printed materials or publications. Label each page with name and EIN. EXHIBITS A THROUGH R

- User fee payment placed in envelope on top of checklist. DO NOT STAPLE or otherwise attach your check or money order to your application. Instead, just place it in the envelope.

- Employer Identification Number (EIN) EXHIBIT R

- Completed Parts I through XI of the application, including any requested information and any required Schedules A through H.
 - You must provide specific details about your past, present, and planned activities.
 - Generalizations or failure to answer questions in the Form 1023 application will prevent us from recognizing you as tax exempt.
 - Describe your purposes and proposed activities in specific easily understood terms.
 - Financial information should correspond with proposed activities.

- Schedules. Submit only those schedules that apply to you and check either "Yes" or "No" below.

Schedule A	Yes ___ No <input checked="" type="checkbox"/>	Schedule E	Yes ___ No <input checked="" type="checkbox"/>
Schedule B	Yes ___ No <input checked="" type="checkbox"/>	Schedule F	Yes ___ No <input checked="" type="checkbox"/>
Schedule C	Yes ___ No <input checked="" type="checkbox"/>	Schedule G	Yes ___ No <input checked="" type="checkbox"/>
Schedule D	Yes ___ No <input checked="" type="checkbox"/>	Schedule H	Yes ___ No <input checked="" type="checkbox"/>

- An exact copy of your complete articles of organization (creating document). Absence of the proper purpose and dissolution clauses is the number one reason for delays in the issuance of determination letters.
 - Location of Purpose Clause from Part III, line 1 (Page, Article and Paragraph Number) [Pg 1, Art 3, Para 1](#)
 - Location of Dissolution Clause from Part III, line 2b or 2c (Page, Article and Paragraph Number) or by operation of state law [Pg 3, Art 9, Para 1](#)
- Signature of an officer, director, trustee, or other official who is authorized to sign the application.
 - Signature at Part XI of Form 1023.
- Your name on the application must be the same as your legal name as it appears in your articles of organization.

Send completed Form 1023, user fee payment, and all other required information, to:

Internal Revenue Service
P.O. Box 192
Covington, KY 41012-0192

If you are using express mail or a delivery service, send Form 1023, user fee payment, and attachments to:

Internal Revenue Service
201 West Rivercenter Blvd.
Attn: Extracting Stop 312
Covington, KY 41011



**Application for Recognition of Exemption
 Under Section 501(c)(3) of the Internal Revenue Code**

Use the instructions to complete this application and for a definition of all **bold** items. For additional help, call IRS Exempt Organizations Customer Account Services toll-free at 1-877-829-5500. Visit our website at www.irs.gov for forms and publications. If the required information and documents are not submitted with payment of the appropriate user fee, the application may be returned to you.

Attach additional sheets to this application if you need more space to answer fully. Put your name and EIN on each sheet and identify each answer by Part and line number. Complete Parts I - XI of Form 1023 and submit only those Schedules (A through H) that apply to you.

Part I Identification of Applicant

1 Full name of organization (exactly as it appears in your organizing document)		2 c/o Name (if applicable)	
GRANDMA'S GIFTS INC.		EMILY DOUGLAS	
3 Mailing address (Number and street) (see instructions)	Room/Suite	4 Employer Identification Number (EIN)	
444 GREEN MEADOWS DRIVE WEST		26-3109696	
City or town, state or country, and ZIP + 4		5 Month the annual accounting period ends (01 - 12)	
POWELL, OH 43065		12 - DECEMBER	
6 Primary contact (officer, director, trustee, or authorized representative)		b Phone: (614) 620-2071	
a Name: EMILY DOUGLAS, EXECUTIVE DIRECTOR		c Fax: (optional) (614) 321-3724	
7 Are you represented by an authorized representative, such as an attorney or accountant? If "Yes," provide the authorized representative's name, and the name and address of the authorized representative's firm. Include a completed Form 2848, <i>Power of Attorney and Declaration of Representative</i> , with your application if you would like us to communicate with your representative.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8 Was a person who is not one of your officers, directors, trustees, employees, or an authorized representative listed in line 7, paid, or promised payment, to help plan, manage, or advise you about the structure or activities of your organization, or about your financial or tax matters? If "Yes," provide the person's name, the name and address of the person's firm, the amounts paid or promised to be paid, and describe that person's role.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9a Organization's website: www.GrandmasGifts.org			
b Organization's email: (optional) info@grandmasgifts.org			
10 Certain organizations are not required to file an information return (Form 990 or Form 990-EZ). If you are granted tax-exemption, are you claiming to be excused from filing Form 990 or Form 990-EZ? If "Yes," explain. See the instructions for a description of organizations not required to file Form 990 or Form 990-EZ.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11 Date incorporated if a corporation, or formed, if other than a corporation. (MM/DD/YYYY)		08 / 08 / 2008	
12 Were you formed under the laws of a foreign country ? If "Yes," state the country.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Part II Organizational Structure

You must be a corporation (including a limited liability company), an unincorporated association, or a trust to be tax exempt. (See instructions.) **DO NOT file this form unless you can check "Yes" on lines 1, 2, 3, or 4.**

- 1 Are you a **corporation**? If "Yes," attach a copy of your articles of incorporation showing **certification of filing** with the appropriate state agency. Include copies of any amendments to your articles and be sure they also show state filing certification. SEE EXHIBITS A & B **Yes** **No**
- 2 Are you a **limited liability company (LLC)**? If "Yes," attach a copy of your articles of organization showing certification of filing with the appropriate state agency. Also, if you adopted an operating agreement, attach a copy. Include copies of any amendments to your articles and be sure they show state filing certification. Refer to the instructions for circumstances when an LLC should not file its own exemption application. **Yes** **No**
- 3 Are you an **unincorporated association**? If "Yes," attach a copy of your articles of association, constitution, or other similar organizing document that is dated and includes at least two signatures. Include signed and dated copies of any amendments. **Yes** **No**
- 4a Are you a **trust**? If "Yes," attach a signed and dated copy of your trust agreement. Include signed and dated copies of any amendments. **Yes** **No**
- b Have you been funded? If "No," explain how you are formed without anything of value placed in trust. N/A **Yes** **No**
- 5 Have you adopted **bylaws**? If "Yes," attach a current copy showing date of adoption. If "No," explain how your officers, directors, or trustees are selected. SEE EXHIBIT C **Yes** **No**

Part III Required Provisions in Your Organizing Document

The following questions are designed to ensure that when you file this application, your organizing document contains the required provisions to meet the organizational test under section 501(c)(3). Unless you can check the boxes in both lines 1 and 2, your organizing document does not meet the organizational test. **DO NOT file this application until you have amended your organizing document.** Submit your original and amended organizing documents (showing state filing certification if you are a corporation or an LLC) with your application.

- 1 Section 501(c)(3) requires that your organizing document state your exempt purpose(s), such as charitable, religious, educational, and/or scientific purposes. Check the box to confirm that your organizing document meets this requirement. Describe specifically where your organizing document meets this requirement, such as a reference to a particular article or section in your organizing document. Refer to the instructions for exempt purpose language. Location of Purpose Clause (Page, Article, and Paragraph): Page 1, Article 3, Paragraph 1
- 2a Section 501(c)(3) requires that upon dissolution of your organization, your remaining assets must be used exclusively for exempt purposes, such as charitable, religious, educational, and/or scientific purposes. Check the box on line 2a to confirm that your organizing document meets this requirement by express provision for the distribution of assets upon dissolution. If you rely on state law for your dissolution provision, do not check the box on line 2a and go to line 2c.
- 2b If you checked the box on line 2a, specify the location of your dissolution clause (Page, Article, and Paragraph). Do not complete line 2c if you checked box 2a. Page 3, Article 9, Paragraph 1
- 2c See the instructions for information about the operation of state law in your particular state. Check this box if you rely on operation of state law for your dissolution provision and indicate the state: _____

Part IV Narrative Description of Your Activities

Using an attachment, describe your *past, present, and planned* activities in a narrative. If you believe that you have already provided some of this information in response to other parts of this application, you may summarize that information here and refer to the specific parts of the application for supporting details. You may also attach representative copies of newsletters, brochures, or similar documents for supporting details to this narrative. Remember that if this application is approved, it will be open for public inspection. Therefore, your narrative description of activities should be thorough and accurate. Refer to the instructions for information that must be included in your description. EXHIBIT D

Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors

- 1a List the names, titles, and mailing addresses of all of your officers, directors, and trustees. For each person listed, state their total annual **compensation**, or proposed compensation, for all services to the organization, whether as an officer, employee, or other position. Use actual figures, if available. Enter "none" if no compensation is or will be paid. If additional space is needed, attach a separate sheet. Refer to the instructions for information on what to include as compensation.

Name	Title	Mailing address	Compensation amount (annual actual or estimated)
Teresa Daulong	Public Relations Director	2427 Daneswood Ct Spring, TX 77388	none
Morgan Webb	Dir of Giving / Board Treasurer	2081 Park Run Dr APT D Columbus, OH 43220	none
Zach Douglas	Technology Dir / Board Member	444 Green Meadows Drive W Powell, OH 43065	none
Sarah Douglas	Volunteer Dir / Board Secretary	444 Green Meadows Drive W Powell, OH 43065	none
Emily Douglas	CEO / Founder / Board VP	444 Green Meadows Drive W Powell, OH 43065	none

Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors (Continued)

b List the names, titles, and mailing addresses of each of your five highest compensated employees who receive or will receive compensation of more than \$50,000 per year. Use the actual figure, if available. Refer to the instructions for information on what to include as compensation. Do not include officers, directors, or trustees listed in line 1a.

Name	Title	Mailing address	Compensation amount (annual actual or estimated)
NONE - will be volunteer run			

c List the names, names of businesses, and mailing addresses of your five highest compensated **independent contractors** that receive or will receive compensation of more than \$50,000 per year. Use the actual figure, if available. Refer to the instructions for information on what to include as compensation.

Name	Title	Mailing address	Compensation amount (annual actual or estimated)
NONE - no contractors used			

The following "Yes" or "No" questions relate to *past, present, or planned* relationships, transactions, or agreements with your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed in lines 1a, 1b, and 1c.

2a Are any of your officers, directors, or trustees **related** to each other through **family or business relationships**? If "Yes," identify the individuals and explain the relationship. **SEE EXHIBIT F** **Yes** **No**

b Do you have a business relationship with any of your officers, directors, or trustees other than through their position as an officer, director, or trustee? If "Yes," identify the individuals and describe the business relationship with each of your officers, directors, or trustees. **Yes** **No**

c Are any of your officers, directors, or trustees related to your highest compensated employees or highest compensated independent contractors listed on lines 1b or 1c through family or business relationships? If "Yes," identify the individuals and explain the relationship. **Yes** **No** N/A

3a For each of your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed on lines 1a, 1b, or 1c, attach a list showing their name, qualifications, average hours worked, and duties. **SEE EXHIBIT G**

b Do any of your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed on lines 1a, 1b, or 1c receive compensation from any other organizations, whether tax exempt or taxable, that are related to you through **common control**? If "Yes," identify the individuals, explain the relationship between you and the other organization, and describe the compensation arrangement. **Yes** **No** N/A - NO RELATED ORGANIZATIONS.

4 In establishing the compensation for your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed on lines 1a, 1b, and 1c, the following practices are recommended, although they are not required to obtain exemption. Answer "Yes" to all the practices you use. **SEE EXHIBIT H**

a Do you or will the individuals that approve compensation arrangements follow a conflict of interest policy? **Yes** **No**

b Do you or will you approve compensation arrangements in advance of paying compensation? **Yes** **No**

c Do you or will you document in writing the date and terms of approved compensation arrangements? **Yes** **No**

Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors (Continued)

- d** Do you or will you record in writing the decision made by each individual who decided or voted on compensation arrangements? **Yes** **No**
- e** Do you or will you approve compensation arrangements based on information about compensation paid by **similarly situated** taxable or tax-exempt organizations for similar services, current compensation surveys compiled by independent firms, or actual written offers from similarly situated organizations? Refer to the instructions for Part V, lines 1a, 1b, and 1c, for information on what to include as compensation. **Yes** **No**
- f** Do you or will you record in writing both the information on which you relied to base your decision and its source? **Yes** **No**
- g** If you answered "No" to any item on lines 4a through 4f, describe how you set compensation that is **reasonable** for your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed in Part V, lines 1a, 1b, and 1c.
-
- 5a** Have you adopted a **conflict of interest policy** consistent with the sample conflict of interest policy in Appendix A to the instructions? If "Yes," provide a copy of the policy and explain how the policy has been adopted, such as by resolution of your governing board. If "No," answer lines 5b and 5c. **Yes** **No**
- b** What procedures will you follow to assure that persons who have a conflict of interest will not have influence over you for setting their own compensation? EXHIBIT I
- c** What procedures will you follow to assure that persons who have a conflict of interest will not have influence over you regarding business deals with themselves?
- Note:** A conflict of interest policy is recommended though it is not required to obtain exemption. Hospitals, see Schedule C, Section I, line 14.
-
- 6a** Do you or will you compensate any of your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed in lines 1a, 1b, or 1c through **non-fixed payments**, such as discretionary bonuses or revenue-based payments? If "Yes," describe all non-fixed compensation arrangements, including how the amounts are determined, who is eligible for such arrangements, whether you place a limitation on total compensation, and how you determine or will determine that you pay no more than reasonable compensation for services. Refer to the instructions for Part V, lines 1a, 1b, and 1c, for information on what to include as compensation. **Yes** **No**
- b** Do you or will you compensate any of your employees, other than your officers, directors, trustees, or your five highest compensated employees who receive or will receive compensation of more than \$50,000 per year, through non-fixed payments, such as discretionary bonuses or revenue-based payments? If "Yes," describe all non-fixed compensation arrangements, including how the amounts are or will be determined, who is or will be eligible for such arrangements, whether you place or will place a limitation on total compensation, and how you determine or will determine that you pay no more than reasonable compensation for services. Refer to the instructions for Part V, lines 1a, 1b, and 1c, for information on what to include as compensation. **Yes** **No**
-
- 7a** Do you or will you purchase any goods, services, or assets from any of your officers, directors, trustees, highest compensated employees, or highest compensated independent contractors listed in lines 1a, 1b, or 1c? If "Yes," describe any such purchase that you made or intend to make, from whom you make or will make such purchases, how the terms are or will be negotiated at **arm's length**, and explain how you determine or will determine that you pay no more than **fair market value**. Attach copies of any written contracts or other agreements relating to such purchases. **Yes** **No**
- b** Do you or will you sell any goods, services, or assets to any of your officers, directors, trustees, highest compensated employees, or highest compensated independent contractors listed in lines 1a, 1b, or 1c? If "Yes," describe any such sales that you made or intend to make, to whom you make or will make such sales, how the terms are or will be negotiated at arm's length, and explain how you determine or will determine you are or will be paid at least fair market value. Attach copies of any written contracts or other agreements relating to such sales. **Yes** **No**
-
- 8a** Do you or will you have any leases, contracts, loans, or other agreements with your officers, directors, trustees, highest compensated employees, or highest compensated independent contractors listed in lines 1a, 1b, or 1c? If "Yes," provide the information requested in lines 8b through 8f. **Yes** **No**
- b** Describe any written or oral arrangements that you made or intend to make.
- c** Identify with whom you have or will have such arrangements.
- d** Explain how the terms are or will be negotiated at arm's length.
- e** Explain how you determine you pay no more than fair market value or you are paid at least fair market value.
- f** Attach copies of any signed leases, contracts, loans, or other agreements relating to such arrangements.
-
- 9a** Do you or will you have any leases, contracts, loans, or other agreements with any organization in which any of your officers, directors, or trustees are also officers, directors, or trustees, or in which any individual officer, director, or trustee owns more than a 35% interest? If "Yes," provide the information requested in lines 9b through 9f. **Yes** **No**

Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors (Continued)

- b Describe any written or oral arrangements you made or intend to make.
- c Identify with whom you have or will have such arrangements.
- d Explain how the terms are or will be negotiated at arm's length.
- e Explain how you determine or will determine you pay no more than fair market value or that you are paid at least fair market value.
- f Attach a copy of any signed leases, contracts, loans, or other agreements relating to such arrangements.

Part VI Your Members and Other Individuals and Organizations That Receive Benefits From You

The following "Yes" or "No" questions relate to goods, services, and funds you provide to individuals and organizations as part of your activities. Your answers should pertain to *past, present, and planned* activities. (See instructions.)

- 1a In carrying out your exempt purposes, do you provide goods, services, or funds to individuals? If "Yes," describe each program that provides goods, services, or funds to individuals. SEE EXHIBIT J Yes No
- b In carrying out your exempt purposes, do you provide goods, services, or funds to organizations? If "Yes," describe each program that provides goods, services, or funds to organizations. SEE EXHIBIT K Yes No
- 2 Do any of your programs limit the provision of goods, services, or funds to a specific individual or group of specific individuals? For example, answer "Yes," if goods, services, or funds are provided only for a particular individual, your members, individuals who work for a particular employer, or graduates of a particular school. If "Yes," explain the limitation and how recipients are selected for each program. Yes No
- 3 Do any individuals who receive goods, services, or funds through your programs have a family or business relationship with any officer, director, trustee, or with any of your highest compensated employees or highest compensated independent contractors listed in Part V, lines 1a, 1b, and 1c? If "Yes," explain how these related individuals are eligible for goods, services, or funds. Yes No

Part VII Your History

The following "Yes" or "No" questions relate to your history. (See instructions.)

- 1 Are you a **successor** to another organization? Answer "Yes," if you have taken or will take over the activities of another organization; you took over 25% or more of the fair market value of the net assets of another organization; or you were established upon the conversion of an organization from for-profit to non-profit status. If "Yes," complete Schedule G. Yes No
- 2 Are you submitting this application more than 27 months after the end of the month in which you were legally formed? If "Yes," complete Schedule E. Yes No

Part VIII Your Specific Activities

The following "Yes" or "No" questions relate to specific activities that you may conduct. Check the appropriate box. Your answers should pertain to *past, present, and planned* activities. (See instructions.)

- 1 Do you support or oppose candidates in **political campaigns** in any way? If "Yes," explain. Yes No
- 2a Do you attempt to **influence legislation**? If "Yes," explain how you attempt to influence legislation and complete line 2b. If "No," go to line 3a. Yes No
- b Have you made or are you making an **election** to have your legislative activities measured by expenditures by filing Form 5768? If "Yes," attach a copy of the Form 5768 that was already filed or attach a completed Form 5768 that you are filing with this application. If "No," describe whether your attempts to influence legislation are a substantial part of your activities. Include the time and money spent on your attempts to influence legislation as compared to your total activities. Yes No
- 3a Do you or will you operate bingo or **gaming** activities? If "Yes," describe who conducts them, and list all revenue received or expected to be received and expenses paid or expected to be paid in operating these activities. **Revenue and expenses** should be provided for the time periods specified in Part IX, Financial Data. Yes No
- b Do you or will you enter into contracts or other agreements with individuals or organizations to conduct bingo or gaming for you? If "Yes," describe any written or oral arrangements that you made or intend to make, identify with whom you have or will have such arrangements, explain how the terms are or will be negotiated at arm's length, and explain how you determine or will determine you pay no more than fair market value or you will be paid at least fair market value. Attach copies or any written contracts or other agreements relating to such arrangements. Yes No
- c List the states and local jurisdictions, including Indian Reservations, in which you conduct or will conduct gaming or bingo. NONE

Part VIII Your Specific Activities (Continued)

4a Do you or will you undertake **fundraising**? If "Yes," check all the fundraising programs you do or will conduct. (See instructions.) **Yes** **No**

- mail solicitations
- email solicitations
- personal solicitations
- vehicle, boat, plane, or similar donations
- foundation grant solicitations
- phone solicitations
- accept donations on your website
- receive donations from another organization's website
- government grant solicitations
- Other SEE EXHIBITS L, M, N, & O

Attach a description of each fundraising program.

b Do you or will you have written or oral contracts with any individuals or organizations to raise funds for you? If "Yes," describe these activities. Include all revenue and expenses from these activities and state who conducts them. Revenue and expenses should be provided for the time periods specified in Part IX, Financial Data. Also, attach a copy of any contracts or agreements. **Yes** **No**

c Do you or will you engage in fundraising activities for other organizations? If "Yes," describe these arrangements. Include a description of the organizations for which you raise funds and attach copies of all contracts or agreements. **Yes** **No**

d List all states and local jurisdictions in which you conduct fundraising. For each state or local jurisdiction listed, specify whether you fundraise for your own organization, you fundraise for another organization, or another organization fundraises for you. SEE EXHIBIT P

e Do you or will you maintain separate accounts for any contributor under which the contributor has the right to advise on the use or distribution of funds? Answer "Yes" if the donor may provide advice on the types of investments, distributions from the types of investments, or the distribution from the donor's contribution account. If "Yes," describe this program, including the type of advice that may be provided and submit copies of any written materials provided to donors. **Yes** **No**

5 Are you **affiliated** with a governmental unit? If "Yes," explain. **Yes** **No**

6a Do you or will you engage in **economic development**? If "Yes," describe your program. **Yes** **No**

b Describe in full who benefits from your economic development activities and how the activities promote exempt purposes.

7a Do or will persons other than your employees or volunteers **develop** your facilities? If "Yes," describe each facility, the role of the developer, and any business or family relationship(s) between the developer and your officers, directors, or trustees. **Yes** **No**

b Do or will persons other than your employees or volunteers **manage** your activities or facilities? If "Yes," describe each activity and facility, the role of the manager, and any business or family relationship(s) between the manager and your officers, directors, or trustees. **Yes** **No**

c If there is a business or family relationship between any manager or developer and your officers, directors, or trustees, identify the individuals, explain the relationship, describe how contracts are negotiated at arm's length so that you pay no more than fair market value, and submit a copy of any contracts or other agreements. N/A

8 Do you or will you enter into **joint ventures**, including partnerships or **limited liability companies** treated as partnerships, in which you share profits and losses with partners other than section 501(c)(3) organizations? If "Yes," describe the activities of these joint ventures in which you participate. **Yes** **No**

9a Are you applying for exemption as a childcare organization under section 501(k)? If "Yes," answer lines 9b through 9d. If "No," go to line 10. **Yes** **No**

b Do you provide child care so that parents or caretakers of children you care for can be **gainfully employed** (see instructions)? If "No," explain how you qualify as a childcare organization described in section 501(k). **Yes** **No** N/A

c Of the children for whom you provide child care, are 85% or more of them cared for by you to enable their parents or caretakers to be gainfully employed (see instructions)? If "No," explain how you qualify as a childcare organization described in section 501(k). **Yes** **No** N/A

d Are your services available to the general public? If "No," describe the specific group of people for whom your activities are available. Also, see the instructions and explain how you qualify as a childcare organization described in section 501(k). **Yes** **No** N/A

10 Do you or will you publish, own, or have rights in music, literature, tapes, artworks, choreography, scientific discoveries, or other **intellectual property**? If "Yes," explain. Describe who owns or will own any copyrights, patents, or trademarks, whether fees are or will be charged, how the fees are determined, and how any items are or will be produced, distributed, and marketed. **Yes** **No**

Part VIII Your Specific Activities (Continued)

- 11** Do you or will you accept contributions of: real property; conservation easements; closely held securities; intellectual property such as patents, trademarks, and copyrights; works of music or art; licenses; royalties; automobiles, boats, planes, or other vehicles; or collectibles of any type? If "Yes," describe each type of contribution, any conditions imposed by the donor on the contribution, and any agreements with the donor regarding the contribution. Yes No
-
- 12a** Do you or will you operate in a **foreign country or countries?** If "Yes," answer lines 12b through 12d. If "No," go to line 13a. Yes No
- b** Name the foreign countries and regions within the countries in which you operate.
- c** Describe your operations in each country and region in which you operate.
- d** Describe how your operations in each country and region further your exempt purposes.
-
- 13a** Do you or will you make grants, loans, or other distributions to organization(s)? If "Yes," answer lines 13b through 13g. If "No," go to line 14a. Yes No
- b** Describe how your grants, loans, or other distributions to organizations further your exempt purposes.
- c** Do you have written contracts with each of these organizations? If "Yes," attach a copy of each contract. Yes No N/A
- d** Identify each recipient organization and any **relationship** between you and the recipient organization.
- e** Describe the records you keep with respect to the grants, loans, or other distributions you make.
- f** Describe your selection process, including whether you do any of the following:
- (i)** Do you require an application form? If "Yes," attach a copy of the form. Yes No N/A
- (ii)** Do you require a grant proposal? If "Yes," describe whether the grant proposal specifies your responsibilities and those of the grantee, obligates the grantee to use the grant funds only for the purposes for which the grant was made, provides for periodic written reports concerning the use of grant funds, requires a final written report and an accounting of how grant funds were used, and acknowledges your authority to withhold and/or recover grant funds in case such funds are, or appear to be, misused. Yes No N/A
- g** Describe your procedures for oversight of distributions that assure you the resources are used to further your exempt purposes, including whether you require periodic and final reports on the use of resources.
-
- 14a** Do you or will you make grants, loans, or other distributions to foreign organizations? If "Yes," answer lines 14b through 14f. If "No," go to line 15. Yes No
- b** Provide the name of each foreign organization, the country and regions within a country in which each foreign organization operates, and describe any relationship you have with each foreign organization.
- c** Does any foreign organization listed in line 14b accept contributions earmarked for a specific country or specific organization? If "Yes," list all earmarked organizations or countries. Yes No N/A
- d** Do your contributors know that you have ultimate authority to use contributions made to you at your discretion for purposes consistent with your exempt purposes? If "Yes," describe how you relay this information to contributors. Yes No N/A
- e** Do you or will you make pre-grant inquiries about the recipient organization? If "Yes," describe these inquiries, including whether you inquire about the recipient's financial status, its tax-exempt status under the Internal Revenue Code, its ability to accomplish the purpose for which the resources are provided, and other relevant information. Yes No N/A
- f** Do you or will you use any additional procedures to ensure that your distributions to foreign organizations are used in furtherance of your exempt purposes? If "Yes," describe these procedures, including site visits by your employees or compliance checks by impartial experts, to verify that grant funds are being used appropriately. Yes No N/A

Part VIII Your Specific Activities (Continued)

- | | | | |
|-----------|--|-------------------------------------|---|
| 15 | Do you have a close connection with any organizations? If "Yes," explain. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 16 | Are you applying for exemption as a cooperative hospital service organization under section 501(e)? If "Yes," explain. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 17 | Are you applying for exemption as a cooperative service organization of operating educational organizations under section 501(f)? If "Yes," explain. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 18 | Are you applying for exemption as a charitable risk pool under section 501(n)? If "Yes," explain. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 19 | Do you or will you operate a school ? If "Yes," complete Schedule B. Answer "Yes," whether you operate a school as your main function or as a secondary activity. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 20 | Is your main function to provide hospital or medical care ? If "Yes," complete Schedule C. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 21 | Do you or will you provide low-income housing or housing for the elderly or handicapped ? If "Yes," complete Schedule F. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 22 | Do you or will you provide scholarships, fellowships, educational loans, or other educational grants to individuals, including grants for travel, study, or other similar purposes? If "Yes," complete Schedule H. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

Note: Private foundations may use Schedule H to request advance approval of individual grant procedures.

Part IX Financial Data

For purposes of this schedule, years in existence refer to completed tax years. If in existence 4 or more years, complete the schedule for the most recent 4 tax years. If in existence more than 1 year but less than 4 years, complete the statements for each year in existence and provide projections of your likely revenues and expenses based on a reasonable and good faith estimate of your future finances for a total of 3 years of financial information. If in existence less than 1 year, provide projections of your likely revenues and expenses for the current year and the 2 following years, based on a reasonable and good faith estimate of your future finances for a total of 3 years of financial information. (See instructions.)

A. Statement of Revenues and Expenses

	Type of revenue or expense	Current tax year	3 prior tax years or 2 succeeding tax years			(e) Provide Total for (a) through (d)
		(a) From To	(b) From To	(c) From To	(d) From To	
Revenues	1 Gifts, grants, and contributions received (do not include unusual grants)		PLEASE SEE	ATTACHED	EXHIBIT	Q
	2 Membership fees received					
	3 Gross investment income					
	4 Net unrelated business income					
	5 Taxes levied for your benefit					
	6 Value of services or facilities furnished by a governmental unit without charge (not including the value of services generally furnished to the public without charge)					
	7 Any revenue not otherwise listed above or in lines 9-12 below (attach an itemized list)					
	8 Total of lines 1 through 7					
	9 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to your exempt purposes (attach itemized list)					
	10 Total of lines 8 and 9					
	11 Net gain or loss on sale of capital assets (attach schedule and see instructions)					
	12 Unusual grants					
	13 Total Revenue Add lines 10 through 12					
Expenses	14 Fundraising expenses					
	15 Contributions, gifts, grants, and similar amounts paid out (attach an itemized list)					
	16 Disbursements to or for the benefit of members (attach an itemized list)					
	17 Compensation of officers, directors, and trustees					
	18 Other salaries and wages					
	19 Interest expense					
	20 Occupancy (rent, utilities, etc.)					
	21 Depreciation and depletion					
	22 Professional fees					
	23 Any expense not otherwise classified, such as program services (attach itemized list)					
	24 Total Expenses Add lines 14 through 23					

Part IX Financial Data (Continued)

B. Balance Sheet (for your most recently completed tax year)

Year End: **2009**

Assets		(Whole dollars)
1	Cash	1,218
2	Accounts receivable, net	0
3	Inventories	0
4	Bonds and notes receivable (attach an itemized list)	0
5	Corporate stocks (attach an itemized list)	0
6	Loans receivable (attach an itemized list)	0
7	Other investments (attach an itemized list)	0
8	Depreciable and depletable assets (attach an itemized list)	0
9	Land	0
10	Other assets (attach an itemized list)	0
11	Total Assets (add lines 1 through 10)	1,218
Liabilities		
12	Accounts payable	0
13	Contributions, gifts, grants, etc. payable	0
14	Mortgages and notes payable (attach an itemized list)	0
15	Other liabilities (attach an itemized list)	0
16	Total Liabilities (add lines 12 through 15)	0
Fund Balances or Net Assets		
17	Total fund balances or net assets	1,218
18	Total Liabilities and Fund Balances or Net Assets (add lines 16 and 17)	1,218
19	Have there been any substantial changes in your assets or liabilities since the end of the period shown above? If "Yes," explain.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Part X Public Charity Status

Part X is designed to classify you as an organization that is either a **private foundation** or a **public charity**. Public charity status is a more favorable tax status than private foundation status. If you are a private foundation, Part X is designed to further determine whether you are a **private operating foundation**. (See instructions.)

- 1a Are you a private foundation? If "Yes," go to line 1b. If "No," go to line 5 and proceed as instructed. If you are unsure, see the instructions. Yes No
- b As a private foundation, section 508(e) requires special provisions in your organizing document in addition to those that apply to all organizations described in section 501(c)(3). Check the box to confirm that your organizing document meets this requirement, whether by express provision or by reliance on operation of state law. Attach a statement that describes specifically where your organizing document meets this requirement, such as a reference to a particular article or section in your organizing document or by operation of state law. See the instructions, including Appendix B, for information about the special provisions that need to be contained in your organizing document. Go to line 2.
- 2 Are you a private operating foundation? To be a private operating foundation you must engage directly in the active conduct of charitable, religious, educational, and similar activities, as opposed to indirectly carrying out these activities by providing grants to individuals or other organizations. If "Yes," go to line 3. If "No," go to the signature section of Part XI. Yes No
- 3 Have you existed for one or more years? If "Yes," attach financial information showing that you are a private operating foundation; go to the signature section of Part XI. If "No," continue to line 4. Yes No
- 4 Have you attached either (1) an affidavit or opinion of counsel, (including a written affidavit or opinion from a certified public accountant or accounting firm with expertise regarding this tax law matter), that sets forth facts concerning your operations and support to demonstrate that you are likely to satisfy the requirements to be classified as a private operating foundation; or (2) a statement describing your proposed operations as a private operating foundation? Yes No
- 5 If you answered "No" to line 1a, indicate the type of public charity status you are requesting by checking one of the choices below. You may check only one box.
The organization is not a private foundation because it is:
 - a 509(a)(1) and 170(b)(1)(A)(i)—a church or a convention or association of churches. Complete and attach Schedule A.
 - b 509(a)(1) and 170(b)(1)(A)(ii)—a **school**. Complete and attach Schedule B.
 - c 509(a)(1) and 170(b)(1)(A)(iii)—a **hospital**, a cooperative hospital service organization, or a medical research organization operated in conjunction with a hospital. Complete and attach Schedule C.
 - d 509(a)(3)—an organization supporting either one or more organizations described in line 5a through c, f, g, or h or a publicly supported section 501(c)(4), (5), or (6) organization. Complete and attach Schedule D.

Part X Public Charity Status (Continued)

- e 509(a)(4)—an organization organized and operated exclusively for testing for public safety.
- f 509(a)(1) and 170(b)(1)(A)(iv)—an organization operated for the benefit of a college or university that is owned or operated by a governmental unit.
- g 509(a)(1) and 170(b)(1)(A)(vi)—an organization that receives a substantial part of its financial support in the form of contributions from publicly supported organizations, from a governmental unit, or from the general public.
- h 509(a)(2)—an organization that normally receives not more than one-third of its financial support from gross **investment income** and receives more than one-third of its financial support from contributions, membership fees, and gross receipts from activities related to its exempt functions (subject to certain exceptions).
- i A publicly supported organization, but unsure if it is described in 5g or 5h. The organization would like the IRS to decide the correct status.

6 If you checked box g, h, or i in question 5 above, you must request either an **advance** or a **definitive ruling** by selecting one of the boxes below. Refer to the instructions to determine which type of ruling you are eligible to receive.

- a **Request for Advance Ruling:** By checking this box and signing the consent, pursuant to section 6501(c)(4) of the Code you request an advance ruling and agree to extend the statute of limitations on the assessment of excise tax under section 4940 of the Code. The tax will apply only if you do not establish public support status at the end of the 5-year advance ruling period. The assessment period will be extended for the 5 advance ruling years to 8 years, 4 months, and 15 days beyond the end of the first year. You have the right to refuse or limit the extension to a mutually agreed-upon period of time or issue(s). Publication 1035, *Extending the Tax Assessment Period*, provides a more detailed explanation of your rights and the consequences of the choices you make. You may obtain Publication 1035 free of charge from the IRS web site at www.irs.gov or by calling toll-free 1-800-829-3676. Signing this consent will not deprive you of any appeal rights to which you would otherwise be entitled. If you decide not to extend the statute of limitations, you are not eligible for an advance ruling.

Consent Fixing Period of Limitations Upon Assessment of Tax Under Section 4940 of the Internal Revenue Code

For Organization

.....
(Signature of Officer, Director, Trustee, or other authorized official)

.....
(Type or print name of signer)

.....
(Date)

.....
(Type or print title or authority of signer)

For IRS Use Only

.....
IRS Director, Exempt Organizations

.....
(Date)

- b **Request for Definitive Ruling:** Check this box if you have completed one tax year of at least 8 full months and you are requesting a definitive ruling. To confirm your public support status, answer line 6b(i) if you checked box g in line 5 above. Answer line 6b(ii) if you checked box h in line 5 above. If you checked box i in line 5 above, answer both lines 6b(i) and (ii).

(i) (a) Enter 2% of line 8, column (e) on Part IX-A. Statement of Revenues and Expenses. _____

(b) Attach a list showing the name and amount contributed by each person, company, or organization whose gifts totaled more than the 2% amount. If the answer is "None," check this box.

(ii) (a) For each year amounts are included on lines 1, 2, and 9 of Part IX-A. Statement of Revenues and Expenses, attach a list showing the name of and amount received from each **disqualified person**. If the answer is "None," check this box.

(b) For each year amounts are included on line 9 of Part IX-A. Statement of Revenues and Expenses, attach a list showing the name of and amount received from each payer, other than a disqualified person, whose payments were more than the larger of (1) 1% of line 10, Part IX-A. Statement of Revenues and Expenses, or (2) \$5,000. If the answer is "None," check this box.

- 7 Did you receive any unusual grants during any of the years shown on Part IX-A. Statement of Revenues and Expenses? If "Yes," attach a list including the name of the contributor, the date and amount of the grant, a brief description of the grant, and explain why it is unusual. Yes No

Part XI User Fee Information

You must include a user fee payment with this application. It will not be processed without your paid user fee. If your average annual gross receipts have exceeded or will exceed \$10,000 annually over a 4-year period, you must submit payment of \$750. If your gross receipts have not exceeded or will not exceed \$10,000 annually over a 4-year period, the required user fee payment is \$300. See instructions for Part XI, for a definition of **gross receipts** over a 4-year period. Your check or money order must be made payable to the United States Treasury. *User fees are subject to change. Check our website at www.irs.gov and type "User Fee" in the keyword box, or call Customer Account Services at 1-877-829-5500 for current information.*

- 1 Have your annual gross receipts averaged or are they expected to average not more than \$10,000? Yes No
 If "Yes," check the box on line 2 and enclose a user fee payment of \$300 (Subject to change—see above).
 If "No," check the box on line 3 and enclose a user fee payment of \$750 (Subject to change—see above).
- 2 Check the box if you have enclosed the reduced user fee payment of \$300 (Subject to change).
- 3 Check the box if you have enclosed the user fee payment of \$750 (Subject to change).

I declare under the penalties of perjury that I am authorized to sign this application on behalf of the above organization and that I have examined this application, including the accompanying schedules and attachments, and to the best of my knowledge it is true, correct, and complete.

Please Sign Here

.....
 (Signature of Officer, Director, Trustee, or other authorized official)

EMILY DOUGLAS

.....
 (Type or print name of signer)

.....
 (Date)

EXECUTIVE DIRECTOR

.....
 (Type or print title or authority of signer)

Reminder: Send the completed Form 1023 Checklist with your filled-in-application.

EXHIBIT A

PART II, LINE 1 - Enclosed is a copy of the organization's original articles of incorporation showing its certification of filing with the Ohio Secretary of State. The original filing occurred on August 8, 2008.

Doc ID --> 200820601764



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
07/26/2008	200820601764	DOMESTIC ARTICLES/NON-PROFIT (ARN)	125.00	.00	.00	.00	.00

Receipt

This is not a bill. Please do not remit payment.

EMILY DOUGLAS
444 GREEN MEADOWS DR. W.
POWELL, OH 43065

**STATE OF OHIO
CERTIFICATE**

Ohio Secretary of State, Jennifer Brunner

1794703

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

GRANDMA'S GIFTS INC.

and, that said business records show the filing and recording of:

Document(s)

DOMESTIC ARTICLES/NON-PROFIT

Document No(s):

200820601764



United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of
the Secretary of State at Columbus,
Ohio this 8th day of August, A.D.
2008.

Ohio Secretary of State



Prescribed by: The Ohio Secretary of State
Central Ohio: (614) 466-3910
Toll Free: 1-877-SOS-FILE (1-877-767-3453)

www.sos.state.oh.us
e-mail: busserv@sos.state.oh.us

Expedite this Form: (Select One)	
Mail Form to one of the following:	
<input type="radio"/> Yes	PO Box 1390 Columbus, OH 43216 *** Requires an additional fee of \$100 ***
<input checked="" type="radio"/> No	PO Box 670 Columbus, OH 43216

INITIAL ARTICLES OF INCORPORATION RECEIVED
(For Domestic Profit or Nonprofit)
Filing Fee \$125.00

JUL 18 2008

THE UNDERSIGNED HEREBY STATES THE FOLLOWING:

SECRETARY OF STATE

(CHECK ONLY ONE (1) BOX)

<input type="checkbox"/> (1) Articles of Incorporation Profit (113-ARF) ORC 1701	<input checked="" type="checkbox"/> (2) Articles of Incorporation Non-Profit (114-ARN) ORC 1702	<input type="checkbox"/> (3) Articles of Incorporation Professional (170-ARP) Profession _____ ORC 1785
--	---	---

Complete the general information in this section for the box checked above.

FIRST: Name of Corporation Grandma's Gifts Inc.

SECOND: Location Powell Delaware
(City) (County)

Effective Date (Optional) August 8, 2008 Date specified can be no more than 90 days after date of filing. If a date is specified, the date must be a date on or after the date of filing.
(mm/dd/yyyy)

Check here if additional provisions are attached

Complete the information in this section if box (2) or (3) is checked. Completing this section is optional if box (1) is checked.

THIRD: Purpose for which corporation is formed

is dedicated exclusively to charitable & educational purposes & not for gain/individual profit. To advance education, & provide goods/opportunities to individuals, educational institutions, nonprofits, & government groups within the Appalachian Region. To educate people of the world about community service, philanthropy, & opportunities for involvement. To work with groups who have similar missions, goals, & charitable purposes.

Complete the information in this section if box (1) or (3) is checked.

FOURTH: The number of shares which the corporation is authorized to have outstanding (Please state if shares are common or preferred and their par value if any)

(Refer to instructions if needed) _____ (No. of Shares) _____ (Type) _____ (Par Value)

Completing the information in this section is optional

FIFTH: The following are the names and addresses of the individuals who are to serve as initial Directors.

Emily Elizabeth Douglas
(Name)
444 Green Meadows Drive West
(Street) **NOTE: P.O. Box Addresses are NOT acceptable.**

Powell OH 43065
(City) (State) (Zip Code)

Sarah Kathryn Douglas
(Name)
444 Green Meadows Drive West
(Street) **NOTE: P.O. Box Addresses are NOT acceptable.**

Powell OH 43065
(City) (State) (Zip Code)

Zachary Douglas
(Name)
210 East Oakland Ave.
(Street) **NOTE: P.O. Box Addresses are NOT acceptable.**

Columbus OH 43201
(City) (State) (Zip Code)

REQUIRED
 Must be authenticated
 (signed) by an authorized
 representative
 (See instructions)

Emily Elizabeth Douglas
 Authorized Representative

7.11.08
 Date

Emily Elizabeth Douglas
(Print Name)
444 Green Meadows Dr W
Powell, OH 43065

Sarah K Douglas
 Authorized Representative

7.11.08
 Date

Sarah K Douglas
(Print Name)
444 Green Meadows Dr. W
Powell, OH 43065

Zach Douglas
 Authorized Representative

7-11-08
 Date

Zach Douglas
(Print Name)
210 E Oakland Ave
Columbus, OH 43201

Complete the information in this section if box (1) (2) or (3) is checked.

ORIGINAL APPOINTMENT OF STATUTORY AGENT

The undersigned, being at least a majority of the incorporators of Grandma's Gifts Inc. hereby appoint the following to be statutory agent upon whom any process, notice or demand required or permitted by statute to be served upon the corporation may be served. The complete address of the agent is

Terri Ackison Douglas
(Name)
444 Green Meadows Drive West
(Street)
NOTE: P.O. Box Addresses are NOT acceptable.
Powell, Ohio 43065
(City) (Zip Code)

Must be authenticated by an authorized representative

[Signature of Terri Ackison Douglas]
Authorized Representative

7.11.08
Date

[Signature of Sarah K Douglas]
Authorized Representative

7.11.08
Date

[Signature of Jack Douglas]
Authorized Representative

7-11-08
Date

ACCEPTANCE OF APPOINTMENT

The Undersigned, Terri Ackison Douglas, named herein as the

Statutory agent for, Grandma's Gifts Inc. hereby acknowledges and accepts the appointment of statutory agent for said entity.

Signature: [Signature of Terri Ackison Douglas]
(Statutory Agent)

EXHIBIT B

PART II, LINE 1 - Enclosed is a copy of the organization's amended articles of incorporation showing its certification of filing with the Ohio Secretary of State. This filing occurred on August 25, 2010.

Part III: Required Provisions in Your Organizing Documents, Page 2

1 Section 501(c)(3) requires that your organizing document state your exempt purpose(s), such as charitable, religious, educational, and/or scientific purposes. Check the box to confirm that your organizing document meets this requirement. Describe specifically where your organizing document meets this requirement, such as a reference to a particular article or section in your organizing document. Refer to the instructions for exempt purpose language. Location of Purpose Clause (Page, Article, and Paragraph):

Response: Our Articles of Incorporation include required language. See Articles of Incorporation, Article 3 (See *Exhibit B*).

Quoted from Grandma's Gifts Articles of Incorporation (See *Exhibit B*), Article 3:

Article 3:

The primary and specific purposes for which the Corporation is formed are:

(a) To operate exclusively for such charitable and educational purposes as will qualify it as an exempt organization under the Internal Revenue Code of 1986 (or the corresponding provisions of any future United States Internal Revenue Law). The Corporation is dedicated exclusively to charitable and educational purposes and not for gain or individual profit. The following more specific purposes are within the scope of such exempt purposes;

(b) To support, encourage, and advance education in the region of the United States designated by the Appalachian Regional Commission as 'Appalachian'.

(c) To provide goods and opportunities to children, families, libraries, nonprofits, religious organizations, hospitals, parks and recreational groups, and government agencies within the Appalachian Region.

(d) To educate people of the world about community service, philanthropy, and opportunities for involvement.

(e) To work with statewide, national, and international groups who have like missions and charitable purposes.



DATE: 08/27/2010	DOCUMENT ID: 201023800734	DESCRIPTION: DOMESTIC/AMENDED RESTATED ARTICLES (AMA)	FILING: 50.00	EXPED: .00	PENALTY:	CERT: .00	COPY: .00
---------------------	------------------------------	---	------------------	---------------	----------	--------------	--------------

Receipt

This is not a bill. Please do not remit payment.

EMILY DOUGLAS
444 GREEN MEADOWS DRIVE WEST
POWELL, OH 43065

**STATE OF OHIO
CERTIFICATE**

Ohio Secretary of State, Jennifer Brunner

1794703

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

GRANDMA'S GIFTS INC.

and, that said business records show the filing and recording of:

Document(s):	Document No(s):
DOMESTIC/AMENDED RESTATED ARTICLES	201023800734



United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the
Secretary of State at Columbus,
Ohio this 25th day of August, A.D.
2010.

Ohio Secretary of State

GRANDMA'S GIFTS INC.



Prescribed by:

The Ohio Secretary of State
Central Ohio: (614) 466-3910
Toll Free: 1-877-SOS-FILE (1-877-767-3453)

Expedite this Form: (Select One)	
Mail Form to one of the Following:	
<input type="radio"/> Yes	PO Box 1390 Columbus, OH 43216 *** Requires an additional fee of \$100 ***
<input checked="" type="radio"/> No	PO Box 1329 Columbus, OH 43216

www.sos.state.oh.us
e-mail: busserv@sos.state.oh.us

**Certificate of Amendment by
Shareholders or Members
(Domestic)
Filing Fee \$50.00**

RECEIVED
AUG 25 2010
SECRETARY OF STATE

(CHECK ONLY ONE (1) BOX)

(1) Domestic for Profit <input type="checkbox"/> Amended (122-AMAP)	PLEASE READ INSTRUCTIONS <input type="checkbox"/> Amendment (125-AMDS)	(2) Domestic Nonprofit <input checked="" type="checkbox"/> Amended (126-AMAN)	<input type="checkbox"/> Amendment (128-AMD)
--	---	--	---

Complete the general information in this section for the box checked above.

Name of Corporation Grandma's Gifts Inc.

Charter Number 179403 1794703

Name of Officer Terri A. Douglas

Title Non-Executive Board Chair

Please check if additional provisions attached.

The above named Ohio corporation, does hereby certify that:

A meeting of the shareholders directors (*nonprofit only*)

members was duly called and held on August 22, 2010
(Date)

at which meeting a quorum was present in person or by proxy, based upon the quorum present, an affirmative vote was cast which entitled them to exercise 100 % as the voting power of the corporation.

In a writing signed by all of the shareholders directors (*nonprofit amended articles only*)

members who would be entitled to the notice of a meeting or such other proportion not less than a majority as the articles of regulations or bylaws permit.

Clause applies if amended box is checked.

Resolved, that the following amended articles of incorporations be and the same are hereby adopted to supercede and take the place of the existing articles of incorporation and all amendments thereto.

All of the following information must be completed if an amended box is checked. If an amendment box is checked, complete the areas that apply.

FIRST: The name of the corporation is: Grandma's Gifts Inc.

SECOND: The place in the State of Ohio where its principal office is located is in the City of:

Powell Delaware
(city, village or township) (county)

THIRD: The purposes of the corporation are as follows:

(a) To operate exclusively for such charitable and educational purposes as will qualify it as an exempt organization under the Internal Revenue Code of 1986 (or the corresponding provisions of any future United States Internal Revenue Law). The Corporation is dedicated exclusively to charitable and educational purposes and not for gain or individual profit. The following more specific purposes are within the scope of such exempt purposes; (b) To support, encourage, and advance education in the region of the United States designated by the Appalachian Regional Commission as 'Appalachian'. (c) To provide goods and opportunities to children, families, libraries, nonprofits, religious organizations, hospitals, parks and recreational groups, and government agencies within the Appalachian Region. (d) To educate people of the world about community service, philanthropy, and opportunities for involvement. (e) To work with statewide, national, and international groups who have like missions and charitable purposes.

FOURTH: The number of shares which the corporation is authorized to have outstanding is: _____
(Does not apply to box (2))

REQUIRED

Must be authenticated (signed) by an authorized representative (See Instructions)

Terri Douglas
Authorized Representative

8.23.2010
Date

Terri Douglas
(Print Name)
Board Chair

Emily Douglas
Authorized Representative

8.23.2010
Date

Emily Douglas
(Print Name)
Board VP

GRANDMA'S GIFTS INC. ORGANIZING DOCUMENTS:
ARTICLES OF INCORPORATION August 22, 2010



Articles of Incorporation

Article 1:

The corporation shall be named: *Grandma's Gifts, Inc.*

Article 2:

The principal office of the Corporation is to be located:

County of Delaware 444 Green Meadows Drive West, Powell, Ohio 43065

Article 3:

The primary and specific purposes for which the Corporation is formed are:

- (a) To operate exclusively for such charitable and educational purposes as will qualify it as an exempt organization under the Internal Revenue Code of 1986 (or the corresponding provisions of any future United States Internal Revenue Law). The Corporation is dedicated exclusively to charitable and educational purposes and not for gain or individual profit. The following more specific purposes are within the scope of such exempt purposes;
- (b) To support, encourage, and advance education in the region of the United States designated by the Appalachian Regional Commission as 'Appalachian'.
- (c) To provide goods and opportunities to children, families, libraries, nonprofits, religious organizations, hospitals, parks and recreational groups, and government agencies within the Appalachian Region.
- (d) To educate people of the world about community service, philanthropy, and opportunities for involvement.
- (e) To work with statewide, national, and international groups who have like missions and charitable purposes.

Article 4:

The corporation shall have no voting members. The management and affairs of the corporation shall be at all times under the direction of a Board of Directors, whose operations in governing the corporation shall be defined by statute and by the corporation's by-laws. No Director shall have any right, title, or interest in or to any property of the corporation.

**GRANDMA'S GIFTS INC. ORGANIZING DOCUMENTS:
ARTICLES OF INCORPORATION** August 22, 2010

Article 5:

No substantial part of the activities of the Corporation shall be the carrying on of propaganda or other attempts to influence legislation, and the Corporation shall not participate or intervene (by the publishing or distribution of statements or otherwise) in any political campaign on behalf of any candidate for public office.

Article 6:

No part of the net earnings of the Corporation shall inure to the benefit of, or be distributable to, its Members, Directors, Officers, or other private persons, except that the Corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in these Articles.

Article 7:

Notwithstanding any other provision of these Articles, the Corporation shall not carry on any other activities not permitted to be carried on (a) by a corporation exempt from the federal income tax under Section 501(c)(3) of the Internal Revenue Code of 1986 (or the corresponding provision of any future US Internal Revenue Law) or (b) by a corporation, contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code of 1986 (or the corresponding provision of any future US Internal Revenue Law) or (c) by a corporation organized under the Ohio Non-Profit Corporation Law, as now existing or hereafter amended.

Article 8:

The Corporation shall have all powers conferred upon non-profit corporations organized under Chapter 1702 of the Ohio Revised Code (or the corresponding provision of any future Ohio Non-Profit Corporation Law); provided, however, that (a) the Corporation shall neither have nor exercise any power which would prevent it from obtaining exemption from federal income taxation as a corporation described in Section 501(c)(3) of the Internal Revenue Code of 1986 (or the corresponding provision of any future United States Internal Revenue Law), or cause it to lose such exempt status, and (b) the Corporation shall not be operated for the purpose of carrying on a trade or business for profit, and no dividends shall be paid.

(a) To do any and all things and to take any and all actions (not contrary to law), deemed reasonably necessary by the Board of Directors, to carry out the objects and purposes of the Corporation.

(b) To purchase, take, receive, lease as lessee, take by gift, devise, bequest, or otherwise acquire, and to own, hold, use and otherwise deal in and with any real or personal property, or any interest therein, situated in or out of this State as may be necessary and proper for carrying on its legitimate affairs.

(c) To receive and take by gift, grant, assignment, transfer, devise or bequest any real or personal property in trust for any charitable or educational purposes and for such other purposes as may be necessary and proper for carrying out the Corporation's legitimate affairs.

**GRANDMA'S GIFTS INC. ORGANIZING DOCUMENTS:
ARTICLES OF INCORPORATION** August 22, 2010

- (d) To sell, convey, mortgage, pledge, lease as lessor, grant security interests in and otherwise dispose of all or any part of its property and assets.
- (e) To purchase, take, receive, subscribe for or otherwise acquire, own hold, vote, use or employ shares or other interests in securities or obligations of domestic or foreign corporations, associations, partnerships or individuals (whether such organizations or individuals be engaged in business for profit or otherwise) and to sell, mortgage, loan, pledge or otherwise dispose of such shares, interests or obligations. To make contracts and incur liabilities which may be appropriate to enable the Corporation to accomplish any or all of its purposes.
- (g) To borrow money for its corporate purposes at such rate of interest's the Corporation may determine.
- (h) To invest the Corporation's funds from time to time in any real or personal property; to lend money for its corporate purposes and to take and hold real and personal property as security for the payment of funds so invested or loaned.

Article 9:

The assets of the Corporation are irrevocably dedicated to charitable and educational purposes. Upon the dissolution of the Corporation, its assets remaining after payment, or provision for payment, of all debts and liabilities of this Corporation shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not so disposed of shall be disposed of by a Court of Competent Jurisdiction of the county in which the principal office of the Corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

Article 10:

By-laws of the Corporation, consistent with these Articles, may be adopted or amended by the Directors at any regular meeting or any special meeting called for that purpose.

Article 11:

By-laws may be amended by the Directors in the manner provided by law and in accordance with the Corporation by-laws.

Article 12:

No member, officer or Director of this corporation shall be personally liable for the debts or obligations of this corporation of any nature whatsoever, nor shall any of the property of the members, officers or Directors be subject to the payment of the debts or obligations of this corporation.

**GRANDMA'S GIFTS INC. ORGANIZING DOCUMENTS:
ARTICLES OF INCORPORATION** August 22, 2010

Article 13:

The Founder, Emily Elizabeth Douglas, recognizes that by creating a Board of Directors she has relinquished control to the Board to govern the organization. The Founder will continue to represent as the "Vision" of the organization for as long as she so chooses.

This role cannot be pasted to anyone other.

In the event that the Founder feels the organization has "lost its way" in the vision that it was founded upon, she can place a "Coup" - taking back authoritative control. If a Founder Coup has taken place, the Founder will only retain control until a new Board has been created and new Primary Officers selected to once again govern the organization.

Article 14:

The period of duration of this Corporation is perpetual.

Article 15:

The following persons shall serve said Corporation as the initial Board of Directors:

Emily Douglas
Sarah Douglas
Zachary Douglas
Terri Douglas
Jerry Douglas
Morgan Webb

Thereafter, the number and manner of election or appointment of Directors and their terms of office shall be as provided in the By-laws.

Record of Changes:

- State of Ohio Incorporation Date: August 8, 2008
- Articles of Incorporation Amendment Date: August 22, 2010

EXHIBIT C

PART II, LINE 5 - Enclosed is a copy of the organization's bylaws showing the date of adoption effective August 8, 2008.

GRANDMA'S GIFTS INC. ORGANIZING DOCUMENTS:

BY-LAWS August 8, 2008



By-Laws

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

I. Name

- 1. The name of the organization shall be *Grandma's Gifts, Inc.*

II. Board of Directors

- 1. The Board of Directors shall serve without pay and consist of 6 members.
- 2. Eligibility criteria: Board member may be of any age, educational status, gender, orientation, race, ethnicity, religion, or socioeconomic class.
- 3. Board members shall serve 6 years once elected to the board and can serve for an unlimited number of terms.
- 4. Vacancies shall be filled by the Board, with the recommendation of the Executive Director.
- 5. Board members who do not attend (physically or by phone) at least 75% of scheduled board meetings in a year shall be dismissed from the Board.
- 6. Board members must all sign and abide by the organizations conflict of interest policy, whistleblower policy, as well as the by-laws, articles of corporation, and any other documents created in management of the organization.

III. Officers

- 1. The officers of the board shall consist of a Chair, Vice Chair, Secretary, and Treasurer nominated by the Board.
- 2. Elected officers will serve a term of 3 years.
- 3. (a)The Chair shall preside at all Board meetings, appoint committee members, and perform other duties as associated with the office. (b)The Vice-Chair shall assume the duties of the Chair in case of the Chair's absence. (c)The Secretary shall be responsible for the minutes of the Board, keep all approved minutes in a minute book, and send out copies of minutes to all. (d) The Treasurer shall keep record of the organization's budget and prepare financial reports as needed.

IV. Committees

- 1. The Board may appoint standing and ad hoc committees as needed.

GRANDMA'S GIFTS INC. ORGANIZING DOCUMENTS:**BY-LAWS** August 8, 2008**29 V. Meetings**

- 30 1. Regular meetings shall be held quarterly. The time shall be voted on by the members of
31 the board.
32 2. Special meetings may be held at any time when called for by the Chair or a majority of
33 Board members.
34 3. Agendas shall be provided at least 36 hours in advance.

35 VI. Voting

- 36 1. (a) A majority of board members constitutes a quorum. (b) In absence of a quorum, no
37 formal action shall be taken except to adjourn the meeting to a subsequent date.
38 2. Passage of a motion requires a simple majority. Anyone who does not agree with an action
39 has the right to justify their beliefs, so this can be noted in the meetings minutes.

40 VII. Conflict of Interest

- 41 1. Any member of the board who has a financial, personal, or official interest in, or conflict
42 (or appearance of a conflict) with any matter pending before the Board, of such nature
43 that it prevents or may prevent that member from acting on the matter in an impartial
44 manner, will offer to the Board to voluntarily excuse him/herself and will vacate his seat
45 and refrain from discussion and voting on said item.

46 VIII. Fiscal Policies

- 47 1. The fiscal year of the board shall be January 1 to December 31.

48 IX. Founders Clause

- 49 1. The Founder, Emily Elizabeth Douglas, recognizes that by creating a Board of Directors
50 she has relinquished control to the Board to govern the organization.
51 2. The Founder will continue to represent as the "Vision" of the organization for as long as
52 she so chooses. This role cannot be passed to anyone other.
53 3. In the event that the Founder feels the organization has "lost its way" in the vision that it
54 was founded upon, she can place a "Coup" - taking back authoritative control.
55 4. If a Founder Coup has taken place, the Founder will only retain control until a new Board
56 has been created and new Primary Officers selected to once again govern the organization.

57 X. Amendments

- 58 1. These by-laws may be amended by a two-third vote of Board members present at any
59 meeting, provided a quorum is present and provide a copy of the proposed amendment(s)
60 are provided to each Board member at least 36 hours prior to said meeting.

61 Record:

- 62 • Adopted 8/8/2008 by vote of the Grandma's Gifts Board
63 • 5/23/2010 Founders Clause (IX) added and approved by vote of Grandma's Gifts Board

EXHIBIT D

PART IV - Enclosed is a narrative describing our past, present and planned activities.

Part IV: Narrative, Page 2

Using an attachment, describe your *past, present, and planned* activities in a narrative. If you believe that you have already provided some of this information in response to other parts of this application, you may summarize that information here and refer to the specific parts of the application for supporting details. You may also attach representative copies of newsletters, brochures, or similar documents for supporting details to this narrative. Remember that if this application is approved, it will be open for public inspection. Therefore, your narrative description of activities should be thorough and accurate. Refer to the instructions for information that must be included in your description.

1. What is Grandma's Gifts?

Grandma's Gifts, Inc. is dedicated exclusively to charitable and educational purposes to provide goods and educational opportunities to children, families, libraries, nonprofits, religious organizations, hospitals, parks and recreational groups, and government agencies in the region of the United States designated by the Appalachian Regional Commission as 'Appalachia'.

Grandma's Gifts is also dedicated to educating and inspiring people of all ages, races, genders, orientations, religions, and origins across the world about community service, philanthropy, and opportunities for involvement using public speaking and internet and applications such as Facebook, YouTube, micro-volunteering, blogging, podcasts, other social media opportunities.

2. Why is Grandma's Gifts Seeking 501(c)(3) status?

The organization seeks formal designation from the Internal Revenue Service as a 501(c)(3) nonprofit to secure recognition of its mission and to support future fundraising that would allow the expansion and enhancement of its programs to help the people of Appalachia.

3. Background Information

Grandma's Gifts was founded in 1993 by Emily Douglas of Powell, Ohio. Emily was only 11 years old at the time. Emily started this organization in memory of her Appalachian grandmother, Norma Ackison, who died from cancer in 1991. Norma had shared with her grandkids the pains and frustrations of going up in Depression Era poverty. Years later after Norma and her husband, Odell, started their own business, Norma gave back to the community that had raised her and often took her grandchildren along. Inspired by the model of giving, Emily continues the legacy of her beloved grandma by helping those in need in the Appalachian region of the United States.

4. Past Activities

From 1993 to 2002, Grandma's Gifts organized projects to collect new and gently used goods in Delaware County and Franklin County Ohio to send to nonprofit, educational, and religious organizations in the Appalachian areas of Ohio. These Appalachian Ohio organizations then handed out the goods collected to their clients. Goods include items such as books, toys, food, clothing, and school supplies. Past activities provided goods to organizations only. All organization of projects was done by volunteers who donated their time. Donations were from individuals and valued at less than \$50 on most accounts. Emily worked to connect people who small donations to help in small

ways in Appalachia. Details on the past provisions of goods to organizations can be found in *Exhibit K*.

Then in 2002, Grandma's Gifts and founder Emily Douglas established a donor-advise fund at the Columbus Foundation located in Columbus, Ohio. The Columbus Foundation is a public charity dedicated to helping donors help the community through effective charitable giving. Their services include individual, family, and corporate philanthropy, and they provide access to knowledge about community issues, disaster relief, and community critical needs. (The Columbus Foundation - Category: T31, Community Foundations – EIN: 31-6044264)

After working with The Columbus Foundation, Founder Emily Douglas became aware of another community foundation that had a similar mission and goals to that of Grandma's Gifts, The Foundation for Appalachian Ohio. Thus, in February 2008, Grandma's Gifts set-up a donor-advise fund at The Foundation for Appalachian Ohio. The mission of The Foundation for Appalachian Ohio is to enhance the quality of life in the 32 county region of Appalachian Ohio and work with donors and those who care deeply about the region to support regional improvement through the power of charitable giving. (The Foundation for Appalachian Ohio - Category: T31, Community Foundations – EIN: 31-1620483)

Grandma's Gifts main actions during this time period were to connect individuals with nonprofits in Appalachia. Thus, when donors made donations, receipts were issued from the receiving nonprofit, not Grandma's Gifts. After discussions with the Foundation for Appalachian Ohio, Grandma's Gifts volunteers realized that to fully execute their vision of assisting Appalachia and educating others on community services, Grandma's Gifts would need to become its own 501(c)(3).

5. Present Activities

On August 8, 2008, Grandma's Gifts was organized exclusively for charitable and educational purposes as a nonprofit corporation in the State of Ohio. The original incorporation documents are attached as *Exhibit A* and the amended Articles are attached as *Exhibit B*.

Since its incorporation, Grandma's Gifts has provided goods to schools, health departments, libraries, Veteran's Hospitals, and other organizations in Appalachia. This organization also works to educate youth and adults on how they can make a difference.

Grandma's Gifts has always been run by volunteers, meaning that no form of compensation (whether pay, benefits, or other) has been provided in execution of past or present activities. Grandma's Gifts does not plan to have paid employees for the next three years.

Present activities provide goods only to organizations. Details on the present provisions of goods to organizations can be found in *Exhibit K*. Further, *Exhibit K* specifically addresses the present projects of Grandma's Gifts in a table format, which includes the following information:

- | | |
|---|--|
| A. Project Start | H. When Events/Service is Conducted |
| B. Project Name | I. Where Events/Service is Conducted |
| C. Project Description | J. How the event furthers the exempt purpose of the organization |
| D. Past / Present Provided (Goods/Services/Funds) | K. The total time spent on these activities |
| E. Exact Goods Provided | L. The % of time spend on each activity |
| F. Past/Present Goods Provided | M. How the activity is funded |
| G. Who Conducts Events/Service | N. Project alternate names – DBA's |

6. Planned Activities

After receiving Tax ID

While past and present activities only provide goods to organizations, we hope to grow assistance to reach individuals in the future. Details on our future plans for the provisions of goods to organizations can be found in *Exhibit K* and to individuals in *Exhibit L*.

EXHIBIT E

PART V - Enclosed is additional information regarding the board of directors and officers.

Part V: Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors, Page 2

List the names, titles, and mailing addresses of all of your officers, directors, and trustees. For each person listed, state their total annual **compensation**, or proposed compensation, for all services to the organization, whether as an officer, employee, or other position. Use actual figures, if available. Enter "none" if no compensation is or will be paid. If additional space is needed, attach a separate sheet. Refer to the instructions for information on what to include as compensation.

List (continued):

Name	Title	Mailing Address	Compensation Amount (annual actual or estimated)
Jerry Douglas	Board Member	444 Green Meadows Dr W Powell, OH 43065	none
Terri Douglas	Board President	444 Green Meadows Dr W Powell, OH 43065	none
Konstantine Berger	Communications Coordinator	853 40 th Street, APT 6 Brooklyn, NY 11232	none
Michael McCollum	Logistics Coordinator	300 West 5 th Street, APT 3 Marysville, OH 43040	none

EXHIBIT F

PART V, LINE 2a - Enclosed is information regarding family relationships among the board.

Part V: Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors, Page 3

2a Are any of your officers, directors, or trustees **related** to each other through **family** or **business relationships**? If "Yes," identify the individuals and explain the relationship.

Response: A **family** relationship exists between 5 of the individuals identified in Part 5, Questions 1a: Emily Douglas, Sarah Douglas, and Zachary Douglas are siblings and the (adult) children of Terri Douglas and Jerry Douglas. Terri Douglas and Jerry Douglas are still married and live in the same home.

No Business relationships exist between listed individuals.

EXHIBIT G

PART V, LINE 3a - Enclosed is information regarding the qualifications of the board of directors.

Part V: Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors, Page 3

3a For each of your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed on lines 1a, 1b, or 1c, attach a list showing their name, qualifications, average hours worked, and duties.

Response:

Name	Qualifications	Average Hours Worked Per Week	Duties
Douglas, Emily	<ul style="list-style-type: none"> * 20 years of volunteer/nonprofit experience * Bachelor's Degree in Political Science * Masters Degree in Business Administration * Masters Degree in Human Resources * Currently work for an educational nonprofit as a project director 	20 - 30	<ul style="list-style-type: none"> * Primary contact for organization * Plans and manages projects * Acts as organizations public speaker * Attends Board Meetings * Assists in acquiring new volunteers and donors * Assists in locating new organization to assist * Attends special events * Creates organization strategy w/ Board Chair * Write copy for website/ letters/ newsletters * Volunteers at all events
Daulong, Teresa	<ul style="list-style-type: none"> * 15 years of volunteer experience * Bachelor's Degree in Biology * 10 years of experience in business marketing, sales, and public relations office manager * Currently work for an educational nonprofit as a consultant on performance management 	6	<ul style="list-style-type: none"> * Answers calls/emails concerning public speaking events, awards, news articles, past projects, and events. * Write copy for newsletters and website * Researches new opportunities * Assists in acquiring new volunteers and donors * Assist Exec Director in designing new projects * Insures branding consistency * Orders branded materials
Webb, Morgan	<ul style="list-style-type: none"> * 10 years of volunteer experience * Bachelor's Degree in Business * Acted as Treasurer for 2 student groups in College * Masters Degree in Human Resources * Professional Human Resources (PHR) Certified 	5	<ul style="list-style-type: none"> * Manages the finances of the organization * Attends Board meetings and reports on finances * Records and reports on in-kind donations * Write thank you notes to donors * Assists in acquiring new volunteers and donors * Assists in locating new organization to assist * Attends special events

Form 1023 (Rev. 6-2006) **Name:** Grandma's Gifts Inc. **EIN:** 26-3109696

	<ul style="list-style-type: none"> * Currently works for the State of Ohio Department of Administrative Services in Human Resources * Lived in Appalachia for 20 years 		<ul style="list-style-type: none"> * Volunteers at all events
McCollum, Michael	<ul style="list-style-type: none"> * 2 years of volunteer experience * Bachelor's Degree in Industrial Technology * Currently works for Honda Transmission, expert in inventory management, movement, and control * Lived in Appalachia for 22 years 	4	<ul style="list-style-type: none"> * Manages inventory of donated goods * Manages the logistics behind transporting goods to Appalachia through mail, car, or truck * Assists in acquiring new volunteers and donors * Assists in locating new organization to assist * Attends special events * Volunteers at all events
Douglas, Terri	<ul style="list-style-type: none"> * 30+ years of volunteer experience * Bachelor's Degree in Psychology * Current Senior Vice President of Quality at Emerson Network Power * Lean Six Sigma Master Black Belt - (certified quality and efficiency control program expert) * Lived in Appalachia for 23 years 	3	<ul style="list-style-type: none"> * Assists in acquiring new volunteers and donors * Assists in locating new organization to assist * Attends special events * Creates organization strategy w/ Executive Director * Hold individuals accountable to by-laws, and articles of incorporation * Volunteers at all events
Douglas, Zach	<ul style="list-style-type: none"> * 15 years of volunteer experience * Bachelor's Degree in Engineering * President of Engineering and Technology Fraternity at The Ohio State University for 2 years. * Current employed at Honda R&D, involved in automobile-technology design and enhancement 	3	<ul style="list-style-type: none"> * Manages all website and internet related information and citations (includes websites, wiki, podcasts, videos, blogs, etc) * Assists in acquiring new volunteers, donors * Attends and participates in all volunteer events * Attends special invitation events * Volunteers at all events

Form 1023 (Rev. 6-2006) Name: Grandma's Gifts Inc. EIN: 26-3109696

<p>Douglas, Sarah</p>	<ul style="list-style-type: none"> * 15 years of volunteer experience * Bachelor's Degree in History * Masters Degree in History * Doctorial Candidate at The Ohio State University 	<p>2</p>	<ul style="list-style-type: none"> * Board Secretary * Manages Volunteer sign-up, communications, activities, and appreciation * Volunteers at all events
<p>Berger, Konstantine</p>	<ul style="list-style-type: none"> * 5 years of volunteer experience * Bachelor's Degree in Marketing and Communications * Masters Degree in Business Administration * Currently Marketing and Sales Director for international technology firm - Wipro Technologies 	<p>1</p>	<ul style="list-style-type: none"> * Creates marketing and promotional materials for projects - paper and video * Video tapes events and interviews volunteers * Photographs events * Volunteers at events
<p>Douglas, Jerry</p>	<ul style="list-style-type: none"> * 30+ years of volunteer experience * 30+ years of work experience in the logistics and transportation industry * Current Regional Manager at Pitney Bows Mailing Machines Division * Lived in Appalachia for 23 years 	<p>1</p>	<ul style="list-style-type: none"> * Attends Board Meetings and helps with decision making for organization strategy * Assists in acquiring new volunteers and donors * Volunteers at all events

EXHIBIT H

PART V, Line 4 - Enclosed is a narrative regarding the compensation.

Part V: Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors, Page 3

4 In establishing the compensation for your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed on lines 1a, 1b, and 1c, the following practices are recommended, although they are not required to obtain exemption.

Grandma's Gifts, Policy on the Process for Determining Compensation, appears on page 7 of the Grandma's Gifts Policy guide (*Exhibit I*).

While Grandma's Gifts does not plan to have compensated employees for the next three years, a policy has been created if there are to be employees hired in the future. This policy addresses question 4a, 4b, 4c, 4d, 4e, and 4f in *Part V: Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contracts* found on pages 3 and 4 of Form 1023.

EXHIBIT I

PART V, LINE 5a - Enclosed is a copy of the organization's conflict of interest policy and a description of how it was adopted. Further, we have attached the organization's entire policy guide.

Part V: Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors, Page 4

5a Have you adopted a **conflict of interest policy** consistent with the sample conflict of interest policy in Appendix A to the instructions? If "Yes," provide a copy of the policy and explain how the policy has been adopted, such as by resolution of your governing board.

Grandma's Gifts Conflict of Interest Policy appears in the Grandma's Gifts Policy Guide (*Exhibit I*) that was adopted on 2/21/2010 by resolution of the Board. Other documents in the Policy Guide include Public Disclosure, 990 Review, Grant Application Review, Code of Ethics, Document Retention, Whistleblower Policy, and more.

The Conflict of Interest Policy document below appears on page 2 of the Grandma's Gifts Policy guide (*Exhibit I*).

Conflict of Interest Policy

This Conflict of Interest Policy of Grandma's Gifts: (1) defines conflicts of interest; (2) identifies classes of individuals within the Organization covered by this policy; (3) facilitates disclosure of information that may help identify conflicts of interest; and (4) specifies procedures to be followed in managing conflicts of interest.

1. Definition of conflicts of interest

A conflict of interest arises when a person in a position of authority over the Organization may benefit financially from a decision he or she could make in that capacity, including indirect benefits such as to family members or businesses with which the person is closely associated. This policy is focused upon material financial interest of, or benefit to, such persons.

2. Individuals covered

Persons covered by this policy are the Organization's officers, directors, chief employed executive and chief employed finance executive.

3. Facilitation of disclosure

Persons covered by this policy will annually disclose or update to the Chairman of the Board of Directors on a form provided by the Organization their interests that could give rise to conflicts of interest, such as a list of family members, substantial business or investment holdings, and other transactions or affiliations with businesses and other organizations or those of family members.

4. Procedures to manage conflicts

For each interest disclosed to the Chairman of the Board of Directors, the Chairman will determine whether to: (a) take no action; (b) assure full disclosure to the Board of Directors and other individuals covered by this policy; (c) ask the person to rescue from participation in related discussions or decisions within the Organization; or (d) ask the person to resign from his or her position in the Organization or, if the person refuses to resign, become subject to possible removal in accordance with the Organization's removal procedures. The Organization's chief employed executive and chief employed finance executive will monitor proposed or ongoing transactions for conflicts of interest and disclose them to the Chairman of the Board of Directors in order to deal with potential or actual conflicts, whether discovered before or after the transaction has occurred.



Making a Difference in Appalachia since 1993!

P.O. Box 2

Powell, OH 43065

.GrandmasGifts.org

P: 614.388.9007

F: 614.321.3724

These are Policies for the organization Grandma’s Gifts, here on referred to as “Grandma’s Gifts” or “the Organization”.

Table of Contents

Conflict of Interest Policy 2

Public Disclosure Policy 3

990 Review Policy 3

Grant Application Review Policy 3

Grandma’s Gifts Ethics Policy..... 4

Policy on the Process for Determining Compensation7

Donor Privacy Policy 8

Document Retention and Destruction Policy 9

Travel and Expense Reimbursement Policy 11

Volunteer Screening Policy 15

Whistleblower Policy.....16

Cash Recognition Donation Policy 17

In-Kind Donation Policy 17



Conflict of Interest Policy

This Conflict of Interest Policy of Grandma's Gifts: (1) defines conflicts of interest; (2) identifies classes of individuals within the Organization covered by this policy; (3) facilitates disclosure of information that may help identify conflicts of interest; and (4) specifies procedures to be followed in managing conflicts of interest.

1. Definition of conflicts of interest

A conflict of interest arises when a person in a position of authority over the Organization may benefit financially from a decision he or she could make in that capacity, including indirect benefits such as to family members or businesses with which the person is closely associated. This policy is focused upon material financial interest of, or benefit to, such persons.

2. Individuals covered

Persons covered by this policy are the Organization's officers, directors, chief employed executive and chief employed finance executive.

3. Facilitation of disclosure

Persons covered by this policy will annually disclose or update to the Chairman of the Board of Directors on a form provided by the Organization their interests that could give rise to conflicts of interest, such as a list of family members, substantial business or investment holdings, and other transactions or affiliations with businesses and other organizations or those of family members.

4. Procedures to manage conflicts

For each interest disclosed to the Chairman of the Board of Directors, the Chairman will determine whether to: (a) take no action; (b) assure full disclosure to the Board of Directors and other individuals covered by this policy; (c) ask the person to recuse themselves from participation in related discussions or decisions within the Organization; or (d) ask the person to resign from his or her position in the Organization or, if the person refuses to resign, become subject to possible removal in accordance with the Organization's removal procedures. The Organization's chief employed executive and chief employed finance executive will monitor proposed or ongoing transactions for conflicts of interest and disclose them to the Chairman of the Board of Directors in order to deal with potential or actual conflicts, whether discovered before or after the transaction has occurred.



Public Disclosure Policy

The Form 990 and Form 1023 are available to the public upon request. Copies will be provided immediately in the case of in-person requests. Requests received by written, phone, fax, or email means will be honored by directing the requestors to our website. The current Form 990 as well as for the previous 5 years (not including SCHEDULE B), Form 1023, conflict of interest policy, and annual report will be found on the organization's website in printable Adobe format.

We reserve the right to charge a reasonable fee for time and materials (assembly time, copying, plus actual postage) for multiple copies requested from the same individual or related group of individuals.

990 Review Policy

Our policy is to present the Form 990 to the full Board of Directors including significant schedules. Each member of the Board of Directors will receive a copy of the Form 990 prior to the submission of the form to the Internal Revenue Service. The Organization will not file the Form 990 until all members of the Board have reviewed the completed Form 990 and it has been approved.

Grant Application Review Policy

Our policy is to present all prepared Grants to the full Board of Directors including significant attachments. Each member of the Board of Directors will receive a copy of the grant prior to the submission of the form to Granting organization. Grandma's Gifts will not file the Grant Application until all members of the Board have reviewed the completed Application and it has been approved.



Grandma's Gifts Ethics Policy

1. Overview

The purpose for this ethics policy is to establish a culture of openness, trust and integrity in nonprofit practices. Effective ethics is a team effort involving the participation and support of every Organization volunteer and employee. All regular volunteers should familiarize themselves with the ethics guidelines that follow this introduction.

The Organization is committed to protecting employees, partners, vendors and the company from illegal or damaging actions by individuals, either knowingly or unknowingly. When the Organization addresses issues proactively and uses correct judgment, it will help set us apart.

The Organization will not tolerate any wrongdoing or impropriety at anytime. The Organization will take the appropriate measures act quickly in correcting the issue if the ethical code is broken. Any infractions of this code of ethics will not be tolerated.

2. Purpose

The purpose for authoring a publication on ethics is to emphasize the Board, employee, volunteer, donor, and consumer's expectation to be treated to fair practices. This policy will serve to guide behavior to ensure ethical conduct.

3. Scope

This policy applies to employees, volunteers, contractors, consultants, temporaries, and other workers at the organization including all personnel affiliated with third parties.

4. Policy

Grandma's Gifts employees and volunteers must:

- Be honest and ethical in their conduct, including ethical handling of actual or apparent conflicts of interest between personal and professional relationships.
- Comply with applicable government laws, rules and regulations.
- Maintain the confidentiality of information entrusted to them by the Grandma's Gifts or its Customers except when authorized or otherwise legally obligated to disclose.
- Deal fairly with Grandma's Gifts Customers, donors, suppliers, competitors, volunteers, and employees.
- Provide constituents with information that is accurate, completely objective, relevant, timely, and understandable.
- Proactively promote ethical behavior as a responsible partner among peers in the work environment.
- Protect and ensure the proper use of company assets.
- Prohibit improper or fraudulent influence over the External Auditor.

5. Fair and Equal Treatment of Volunteers, Donors, and Future Employees



Grandma's Gifts is committed to providing a work, volunteer, and donor environment that values diversity among all. All policies and activities are intended to create a respectful Organization where every individual has the opportunity to reach their highest potential. Employees, volunteers, and donors are provided opportunities regardless of color, race, religion, gender, age, culture, heritage, sexual orientation, disability, job title, physical appearance, marital status, education, training, and/or experience. At Grandma's Gifts we believe that to fully reach our constituents, work with our donors, and volunteers we must be an organization that not only recognizes diversity but deeply appreciates it. We know that by loving everyone for who they are and what they embody will lead to innovative and creative problem solving, recognition of opportunities for improvement, and new projects.

These policies apply to both applicants and employees in all phases of employment including, recruiting, hiring, placement, training, development, transfer, promotion, demotion, performance reviews, compensation, benefits, and separation from employment.

We will evaluate how we are living up to our code of ethics by requesting feedback on a regular basis from our volunteers, donors, and customers.

6. Fair and Equal Treatment of Individual Gift Recipients

Grandma's Gifts works to insure that no person is excluded from receiving goods because of cultural heritage, race, national origin, ethnicity, age, gender, veteran status, sexual orientation, marital status, religion, or any other discriminatory reason.

Individuals that receive goods from Grandma's Gifts must reside within the Appalachian Region of the United States as defined by the United States Government's Appalachian Regional Commission for at least 90% of the year (January – December) **AND** be an individual "in need". Individuals "in need" are for example, children who qualify for federal free lunch; individuals residing at a homeless shelter, safe haven shelter, or veterans hospital; individuals who are able to receive free treatments from county or city health departments; etc.

7. Fair and Equal Treatment of Organization Gift Recipients

Organizations that receive goods from Grandma's Gifts to hand out to their clients must be an educational, religious, or nonprofit organization within the Appalachian Region of the United States as defined by the United States Government's Appalachian Regional Commission **AND** serve peoples "in need". Organizations receiving goods from Grandma's Gifts are not to discriminate against current or future clients for reasons of cultural heritage, race, national origin, ethnicity, age, gender, veteran status, sexual orientation, marital status, or religion.

Donations received by organizations from Grandma's Gifts may not be sold, bartered, or exchanged by the receiving organizations with its clients for services, goods, or funds. Grandma's Gifts works to protect its donors and gifts recipients from the unacceptable practices of the sale, barter, or exchange of donated items for other goods, services, or funds.



We expect our partner organizations (and their associated agencies) to abide by our policies and guidelines and to report partners and agencies that do not. Grandma's Gifts takes such complaints very seriously. All complaints will be investigated and appropriate legal action, criminal and/or civil, will be taken against any partner who is not using received items in compliance with Grandma's Gifts guidelines.

Grandma's Gifts cooperates fully with all law enforcement and administrative agencies while investigating complaints. Further, agencies not using received items in compliance with Grandma's Gifts guidelines will have their partnership terminated. Partners should realize that violation of Grandma's Gifts policy against the sale, barter or exchange of donated items has far-reaching implications.

Any item that is lost or stolen must be reported immediately to Grandma's Gifts by a telephone call to (614) 388-9007. Please take an inventory of what items are missing and how they were lost or stolen. Notify us in writing of all of the information regarding the loss, including steps or measures taken to prevent any future losses. Grandma's Gifts may not be able to replace lost or stolen donations.

8. Enforcement

Any infractions of this code of ethics will not be tolerated and Grandma's Gifts will act quickly in correcting the issue if the ethical code is broken.

Any employee found to have violated this policy may be subject to disciplinary action, up to and including termination of employment.



Policy on the Process for Determining Compensation

As of February 21, 2010 Grandma's Gifts has no paid employees nor expects to have employees in the next three years. The following is the Policy if and when the organization decides to employ an individual.

This Policy on the Process for Determining Compensation of Grandma's Gifts applies to the compensation of all persons employed by the Organization.

The process includes all of these elements: (1) review and approval by the board of directors or compensation committee of the Organization; (2) use of data as to comparable compensation; and (3) contemporaneous documentation and recordkeeping.

Review and approval

The compensation of the person is reviewed and approved by the board of directors or compensation committee of the Organization, provided that persons with conflicts of interest (the Conflict of Interest Policy is on page 2 of this document) with respect to the compensation arrangement at issue are not involved in this review and approval. Compensation arrangements will be approved in advance of paying compensation to an individual of the organization or independent contractor.

Use of data as to comparable compensation

The compensation of the person is reviewed and approved using data as to comparable compensation for similarly qualified persons in functionally comparable positions at similarly situated organizations. This process shall involve job analysis and job evaluation. Six to ten similar organizations will be used to evaluate a jobs market value.

Contemporaneous documentation and recordkeeping

There is contemporaneous documentation and recordkeeping with respect to the deliberations and decisions regarding the compensation arrangement.



Donor Privacy Policy

Our Commitment to Privacy

We treat our donors, volunteers, and gift recipients as we would like to be treated. We know the importance of personal privacy and will act to protect yours. To better protect our donor's privacy and wishes we created this notice explaining our online and personal information practices.

Web Collected Information

This notice applies to all information collected or submitted on the Grandma's Gifts website. When you use the public areas of our website, you are doing so anonymously. On some pages, you can make requests and/or register for our newsletter. The following personal information MAY be collected at these pages: Name, Organization, Physical Address, E-mail address, Phone number, Phone/fax numbers

The Way We Use Information

We do collect aggregate use information, such as the number of hits per page, for internal and marketing use only; we do not provide your personally identifying information to the public.

We use the information you provide about yourself when conducting a transaction to complete that transaction only. We do not share this information with outside parties except to the extent necessary to complete your request.

We use return e-mail addresses to answer the e-mail we receive. Such addresses are not shared with outside parties.



Document Retention and Destruction Policy

This Document Retention and Destruction Policy of Grandma's Gifts identifies the record retention responsibilities of staff, volunteers, members of the Board of Directors, and outsiders for maintaining and documenting the storage and destruction of the Organization's documents and records.

1. Rules

The Organization's staff, volunteers, members of the Board of Directors and outsiders (i.e., independent contractors via agreements with them) are required to honor these rules: (a) paper or electronic documents indicated under the terms for retention below will be transferred and maintained by the Human Resources, Legal or Administrative staffs/departments or their equivalents; (b) all other paper documents will be destroyed after three years; and (c) **no paper or electronic documents will be destroyed or deleted if pertinent to any ongoing or anticipated government investigation or proceeding or private litigation.**

2. Retention Term

Document Type

- Accounts payable ledgers and schedules: 7 years
- Audit reports: Permanently
- Bank reconciliations: 2 years
- Bank statements: 3 years
- Checks (for important payments and purchases): Permanently
- Contracts, mortgages, notes and leases (expired): Permanently
- Contracts (still in effect): Permanently
- Correspondence (general): 2 years
- Correspondence (legal and important matters): Permanently
- Correspondence (with customers and vendors): 2 years
- Deeds, mortgages, and bills of sale: Permanently
- Depreciation Schedules: Permanently
- Duplicate deposit slips: 2 years
- Employment applications: 3 years
- Expense analyses/expense distribution schedules: 7 years
- Yearend financial statements: Permanently
- Insurance policies (expired): 3 years
- Insurance records, current accident reports, claims, policies, etc.: Permanently
- Intellectual property records – Copyright and trademark/service mark registrations and samples of protected works: Permanently
- Internal audit reports: Permanently
- Inventories of products, materials, and supplies: 7 years
- Invoices (to customers, from vendors): 7 years
- Minute books, bylaws, and charter: Permanently
- Patents and related papers: Permanently
- Payroll records and summaries: 7 years
- Personnel files (terminated employees): 7 years
- Retirement and pension records: Permanently
- Tax returns and worksheets: Permanently
- Timesheets: 7 years
- Withholding tax statements: 7 years
- Other electronic records, documents and files: 1 year



- Other electronic/media files (television interviews, videos, photos, podcasts, radio, etc):
Permanently

3. Exceptions

Exceptions to these rules and terms for retention may be granted only by vote of the Board.



Travel and Expense Reimbursement Policy

1. Purpose

The Board of Directors of Grandma's Gifts recognizes that board members, officers, employees, or regular volunteers (all referred to as "Personnel" this point forth), of the Organization may be required to travel or incur other expenses from time to time to conduct organization business and to further the mission of this nonprofit organization. The purpose of this Policy is to ensure that (a) adequate cost controls are in place, (b) travel and other expenditures are appropriate, and (c) to provide a uniform and consistent approach for the timely reimbursement of authorized expenses incurred by Personnel. It is the policy of the Organization to reimburse only reasonable and necessary expenses actually incurred by Personnel. When incurring business expenses,

The Organization expects Personnel to:

- Exercise discretion and good business judgment with respect to those expenses.
- Be cost conscious and spend money as carefully and judiciously as the individual would spend his or her own funds.
- Report expenses, supported by required documentation, as they were actually spent.

2. Expense Report

Expenses will not be reimbursed unless the individual requesting reimbursement submits a written Expense Report. The Expense Report, which shall be submitted at least monthly or within two weeks of the completion of travel if travel expense reimbursement is requested must include:

- The individual's name
- If reimbursement for travel is requested, the date, origin, destination and purpose of the trip, including a description of each organization-related activity during the trip.
- The name and affiliation of all people for whom expenses are claimed (i.e., people on whom money is spent (e.g., gifts, meals) in order to conduct the Organizations business).
- An itemized list of all expenses for which reimbursement is requested.

3. Receipts

Receipts are required for all expenditures billed directly to the Organization such as airfare and hotel charges. No expenses will be reimbursed to Personnel unless the individual requesting reimbursement submits with the Expense Report written receipts from each vendor showing the vendor's name, a description of the services provided (if not otherwise obvious), the date, and the total expenses, including tips (if applicable). A credit card receipt or statement may be used to document the vendor and date of an expense, provided other required details of the expenditure are fully documented.

4. Organization Credit Cards

If a credit card is issued to personnel for travel (and other) organization-related expenses, the requirements for regular expense reports, explaining charges, as described above under "Expenses Reports" must still be met, and charges may not be made for "Non-Reimbursable Expenditures" as described below. Failure to meet the Expense Report requirements, or making of inappropriate charges will result in loss of the credit card.



5. General Travel Requirements

Necessity of Travel. In determining the reasonableness and necessity of travel expenses, Personnel and the person authorizing the travel shall consider the ways in which the Organization will benefit from the travel and weigh those benefits against the anticipated costs of the travel. The same considerations shall be taken into account in deciding whether the benefits to the Organization outweigh the costs, less expensive alternatives, such as participation by telephone or video conferencing, or the availability of local programs or training opportunities, shall be considered.

Personal and Spousal Travel Expenses. With advance approval from the executive director, individuals traveling on behalf of the Organization may incorporate personal travel or business with their Organization-related trips; however, Personnel shall not arrange travel at a time that is less advantageous to the Organization or involving greater expenses to the Organization in order to accommodate personal travel plans. Any additional expenses incurred as a result of personal travel, including but not limited to extra hotel nights, additional stopovers, meals or transportation, are the sole responsibility of the individual and will not be reimbursed by the Organization. Expenses associated with travel of an individual's spouse, family or friends will not be reimbursed by the Organization.

Air Travel

- General. Air travel reservations should be made as far in advance as possible in order to take advantage of reduced fares.
- Frequent Flyer Miles and Compensation for Denied Boarding. Personnel traveling on behalf of the Organization may accept and retain frequent flyer miles and compensation for denied boarding for their personal use. Individuals may not deliberately patronize a single airline to accumulate frequent flyer miles if less expensive comparable tickets are available on another airline.

Lodging

- Personnel traveling on behalf of the Organization may be reimbursed at the single room rate for the reasonable cost of hotel accommodations. Convenience, the cost of staying in the city in which the hotel is located, and proximity to other venues on the individual's itinerary shall be considered in determining reasonableness. Personnel shall make use of available corporate and discount rates for hotels.

Out-Of-Town Meals

- Personnel traveling on behalf of the Organization are reimbursed on a per meal basis.

Ground Transportation

Employees are expected to use the most economical ground transportation appropriate under the circumstances and should generally use the following, in this order of desirability:

- *Courtesy Cars.* Many hotels have courtesy cars, which will take you to and from the airport at no charge. Employees should take advantage of this free service whenever possible. Another alternative may be a shuttle or bus.



- *Taxis.* When courtesy cars and airport shuttles are not available, a taxi is often the next most economical and convenient form of transportation when the trip is for a limited time and minimal mileage is involved.
- *Rental Cars.* Car rentals are expensive so other forms of transportation should be considered when practical. Employees will be allowed to rent a car while out of town provided that the cost is less than alternative methods of transportation.

Personal Cars

Personnel are compensated for use of their personal cars when used for the Organization's business. When individuals use their personal car for such travel, including travel to and from the airport, mileage will be allowed at the currently approved IRS rate per mile.

In the case of individuals using their personal cars to take a trip that would normally be made by air, mileage will be allowed at the currently approved rate; however, the total mileage reimbursement will not exceed the sum of the lowest available round trip coach airfare.

Parking/Tolls

Parking and toll expenses, including charges for hotel parking, incurred by Personnel traveling on organization business will be reimbursed. The costs of parking tickets, fines, car washes, valet service, etc., are the responsibility of the employee and will not be reimbursed.

On-airport parking is permitted for short business trips. For extended trips, Personnel should use off-airport facilities.

Entertainment and Meetings

Reasonable expenses incurred for meetings or other types of business-related entertainment will be reimbursed only if the expenditures are approved in advance by executive director of the Organization and qualify as tax deductible expenses. Detailed documentation for any such expense must be provided, including:

- Date and place of entertainment
- Nature of expense
- Name, titles, and affiliation of those entertained
- A complete description of the business purpose for the activity including the specific business matter discussed
- Vendor receipts (not credit card receipts or statements) showing the vendor's name, a description of the services provided, the date, and the total expenses, including tips (if applicable).

D. Other Expenses

Reasonable organization-related telephone and fax charges due to absence of Personnel from the individual's place of business are reimbursable. In addition, reasonable and necessary gratuities that are not covered under meals may be reimbursed.

Non-reimbursable Expenditures

The Organization maintains a strict policy that expenses in any category that could be perceived as lavish or excessive will not be reimbursed, as such expenses are inappropriate for reimbursement. Expenses that are not reimbursable include, but are not limited to:

- Travel insurance
- First class tickets or upgrades



- When lodging accommodations have been arranged by the Organization and the individual elects to stay elsewhere, reimbursement is made at the amount no higher than the rate negotiated by the Organization. Reimbursement shall not be made for transportation between the alternate lodging and the meeting site.
- Limousine travel
- Movies, liquor, or bar costs
- Membership dues at any country club, private club, presidents club, athletic club, golf club, tennis club or similar recreational organization
- Participation in or attendance at golf or tennis tournaments, NASCAR races or other sporting events, without the advance approval of the chairman of the board or his designee
- Food, liquor, admission, or any other items from a men's or women's adult club restaurant or establishment
- Purchase of golf clubs or any other sporting equipment
- Spa or exercise charges
- Business conferences and entertainment which are not approved by a the executive director of the Organization
- Valet service
- Car washes
- Expenses for spouses, friends, or relatives. If a spouse, friend or relative accompanies Personnel on a trip, it is the responsibility of the Personnel to determine any added cost for double occupancy and related expenses and to make the appropriate adjustment in the reimbursement request.



Volunteer Screening Policy

Amended Ohio Senate Bill 187 (Ohio Revised Code sections 109.574-577, 121.401, 121.402) became law on March 22, 2001. The legislation's purpose is to help ensure that youth-serving organizations that place volunteers in positions requiring "unsupervised access to children on a regular basis"¹ use appropriate screening methods.

This legislation includes volunteers for any "religious, charitable, scientific, educational, athletic, or service institution or organization or local government entity that provides care, treatment, education, training, instruction, supervision or recreation to children." (Section 109.574)

This law does not mandate fingerprint checks. It does say, however, that fingerprint checks are suggested as a "best practice." In the event that the Organization plans to have a volunteer who is given "unsupervised access to children on a regular basis" that individual will be required to complete a background check paid for by the Organization.

Section 109.575 requires that all *potential* volunteers for youth-serving organizations are informed that they may be required to be fingerprinted. The Organization will share this information with all potential volunteers via the website, sign-up forms, letters, etc.

According to Section 109.572(A)(1), if an organization discovers through **any** method (fingerprint checks, references, county checks, self disclosure, or otherwise) that a volunteer has a felony record of one of the offenses listed within the legislation, that organization has three choices.

1. It may dismiss the volunteer;
2. It may move the volunteer into a position that does not require unsupervised access to a child; or
3. If the organization chooses to keep the volunteer in that position, it must notify the parents of **each** child for whom the volunteer provides services. The organization must name the individual, but may not identify the offense(s). (Section 109.576)

Such occurrences will be individually reviewed by the Board and one of the 3 above choices selected based on the findings and the role the individual was serving. All decisions shall be made in the best interest of the children the organization is serving.

¹ "Unsupervised" means that "no other person 18 years or older is present in the same room with the child and/or if outdoors, no other person 18 years or older is within a 30 yard radius of the child or has visual contact with the child." (Section 109.574) A child is defined as an individual under age 18 or a mentally and/or physically handicapped individual under the age of 21.



Whistleblower Policy

This Whistleblower Policy of Grandma's Gifts: (1) encourages staff and volunteers to come forward with credible information on illegal practices or serious violations of adopted policies of the Organization; (2) specifies that the Organization will protect the person from retaliation; and (3) identifies where such information can be reported.

1. Encouragement of reporting. The Organization encourages complaints, reports or inquiries about illegal practices or serious violations of the Organization's policies, including illegal or improper conduct by the Organization itself, by its leadership, or by others on its behalf. Appropriate subjects to raise under this policy would include financial improprieties, accounting or audit matters, ethical violations, or other similar illegal or improper practices or policies. Other subjects on which the Organization has existing complaint mechanisms should be addressed under those mechanisms, such as raising matters of alleged discrimination or harassment via the Organization's human resources channels, unless those channels are themselves implicated in the wrongdoing. This policy is not intended to provide a means of appeal from outcomes in those other mechanisms.

2. Protection from retaliation. The Organization prohibits retaliation by or on behalf of the Organization against staff or volunteers for making good faith complaints, reports or inquiries under this policy or for participating in a review or investigation under this policy. This protection extends to those whose allegations are made in good faith but prove to be mistaken. The Organization reserves the right to discipline persons who make bad faith, knowingly false, or vexatious complaints, reports or inquiries or who otherwise abuse this policy.

3. Where to report. Complaints, reports or inquiries may be made under this policy on a confidential or anonymous basis. They should describe in detail the specific facts demonstrating the bases for the complaints, reports or inquiries. They should be directed to the Organization's chief employed executive or Chairman of the Board of Directors; if both of those persons are implicated in the complaint, report or inquiry, it should be directed to the Executive Director. The Organization will conduct a prompt, discreet, and objective review or investigation. Staff or volunteers must recognize that the Organization may be unable to fully evaluate a vague or general complaint, report or inquiry that is made anonymously.



Cash Recognition Donation Policy

It is the donor's responsibility to deduct charitable contributions. They must itemize deductions on Schedule A (Form 1040) or Schedule A (Form 1040NR).

Grandma's Gifts will provide thank you notes with the appropriate information included that maintain the organizations records.

In-Kind Donation Policy

Grandma's Gifts heavily relies on generous donations from private citizens and businesses to continue to our work. Grandma's Gifts will adhere to all IRS regulations pertain to the recognition, valuation, and reporting of in-kind donations.

"In-kind giving" refers to contributions of goods and services that are of value to a nonprofit organization. Many donors receive great satisfaction and comfort from passing useful items they no longer needed onto charities or safety in using their funds to purchase goods for an organization. In-Kind donations include items such as, but not limited to:

- Clothing
- Shoes
- House wares
- Tools
- Office supplies
- Toys
- Games
- Books
- Medical supplies
- Dental Hygiene Items
- Silverware
- Dishes
- A freezer
- Hotel rooms
- Toiletries
- Art
- Land
- A digital camera
- Dog and cat food
- A snow plow
- Printing services
- Canned foods
- Shares of stock
- A utility trailer
- Cell phones
- School supplies
- Storage shed
- Decorations
- Vacuum cleaner
- Eyeglasses
- Seeds
- Gym Equipment
- Playground Equipment
- Food, Water, Juice, etc
- Trash bags
- Gloves, hats, scarves

"Fair market value (FMV) is the price that property would sell for on the open market. It is the price that would be agreed on between a willing buyer and a willing seller, with neither being required to act, and both having knowledge of the relevant facts."² IRS Publication 561 (<http://www.irs.gov/pub/irs-pdf/p561.pdf>) explains how to determine the fair market value of your donation.

Appraisals are not necessary for items of property for which you claim a deduction of \$5,000 or less. (There is one exception, described in IRS Publication 561 on page 9.) However, you generally will need an appraisal for donated property for which you claim a deduction of more than \$5,000. There are exceptions described in IRS Publication 561 on page 9-11. (<http://www.irs.gov/pub/irs-pdf/p561.pdf>.)

² IRS Publication 561, Page 2.



As the IRS states, not every in-kind donation is tax-deductible. Donated services, although often welcomed by donors, generally cannot be written off. IRS Publication 526 (<http://www.irs.gov/pub/irs-pdf/p526.pdf>) outlines what types of donations can be deducted and how to claim a deduction.

It is the donors responsibility to deduct charitable contributions and list them on their tax return at their FMV. They must itemize deductions on Schedule A (Form 1040) or Schedule A (Form 1040NR). It is the responsibility of the donor when donating goods worth over \$5,000 to obtain an appraisal. If the claimed deduction for an item donated property is more than \$5,000, you must attach Form 8283 to your tax return and complete Section B.³

The information above is not legal or tax advice to donors, rather Grandma's Gifts acknowledging that the organization will follow all IRS guidelines pertaining to in-kind charitable contributions.

Record:

- Adopted 2/21/2010 by vote of the Grandma's Gifts Board

– DOCUMENT LAST PAGE –

³ IRS Publication 561, Page 11.



EXHIBIT J

PART VI, LINE 1a - Enclosed is information pertaining to the provision of goods, services, or funds to individuals.

EXHIBIT J

Part IV: 1a - Past, Present, and Future provisions of Goods, Services, and Funds to Individuals												
Project Name		Project Description	Past			Present			Future			NOTE
			Goods	Services	Funds	Goods	Services	Funds	Goods	Services	Funds	
1	Appalachian Secret Santa	See 1023 Supplement Pg 4	NO	X	X	NO	X	X	YES	X	X	We would like to be able to hold holiday parties and buy gifts for children in need and distribute these goods directly to children and their families in Appalachia.
2	Valentines for Veterans	See 1023 Supplement Pg 4	NO	X	X	NO	X	X	NO	X	X	NA
3	Spring Clean Book Drive	See 1023 Supplement Pg 4	NO	X	X	NO	X	X	YES	X	X	We would like to be able to provide books to children in need in Appalachia so they can start or grow their own personal library.
4	Thanksgiving Turkey Sculpture	See 1023 Supplement Pg 5	NO	X	X	NO	X	X	YES	X	X	We would like to be able to provide canned food to families in need in Appalachia.
5	Rainbow Project	See 1023 Supplement Pg 5	NO	X	X	NO	X	X	YES	X	X	We would like to be able to provide school supplies (pencils, paper, markers, notebooks, binders, glue, crayons, book bags, etc.) to individual children in need in Appalachia.
6	Trick-or-Teeth!	See 1023 Supplement Pg 6	NO	X	X	NO	X	X	YES	YES	X	We would like to be able to provide dental hygiene goods (toothbrushes, toothpaste, dental floss, etc) to individuals in Appalachia. We would also like to get a group of dentists to volunteer their time and provide dental care services to individuals.

Form 1023 (Rev. 6-2006) Name: Grandma's Gifts Inc. EIN: 26-3109696

7	Seeds for Success	See 1023 Supplement Pg 6	NO	X	X	NO	X	X	YES	X	X	We would like to be able to provide vegetable seeds and young vegetable plants to individuals in Appalachia so they can have their own gardens and grow their own food.
8	Bubbles Breaking Barriers	See 1023 Supplement Pg 7	NO	X	X	NO	X	X	YES	X	X	We would like to be able to provide personal hygiene goods (toothbrushes, toothpaste, body soap, shampoo, conditioner, lotion, hand sanitizer, razors, shaving cream, etc) to individuals of all ages in Appalachia, in need.

EXHIBIT K

PART VI, LINE 1b - Enclosed is information pertaining to the provision of goods, services, or funds to organizations.

EXHIBIT K

Part IV: 1b - Past, Present, and Future provisions of Goods, Services, and Funds to Organizations											
Project Name	Project Description	Past			Present			Future			NOTE
		Goods	Services	Funds	Goods	Services	Funds	Goods	Services	Funds	
1	Appalachian Secret Santa	YES	X	X	YES	X	X	YES	X	X	We would like to continue providing goods (clothing, books, toys, etc) to Churches, Nonprofits, Schools, and County/City Social Services groups in Appalachia, who identify, verify, and assist children in need for Christmas.
2	Valentines for Veterans	YES	X	X	YES	X	X	YES	X	X	We would like to continue providing handmade Valentines to Veterans Hospitals and Veterans of Foreign Wars (VFW's) Clubs in Appalachia for Valentines Days.
3	Spring Clean Book Drive	YES	X	X	YES	X	X	YES	X	X	We would like to continue providing new and gently used books to Libraries, Churches, Schools, Head Start Programs, and Day Cares in Appalachia.
4	Thanksgiving Canned Food Drive	YES	X	X	YES	X	X	YES	X	X	We would like to continue providing canned food to Churches with Food Pantries and individual Food Pantries in Appalachia.
5	Rainbow Project	YES	X	X	YES	X	X	YES	X	X	We would like to continue providing school supplies (pencils, paper, markers, notebooks, binders, glue, crayons, book bags, etc.) to churches and Schools in Appalachia.

Form 1023 (Rev. 6-2006) Name: Grandma's Gifts Inc. EIN: 26-3109696

6	Trick-or-Teeth!		YES	X	X	YES	X	X	YES	X	X	We would like to continue providing dental hygiene goods (toothbrushes, toothpaste, dental floss, etc) to Schools, Churches, Head Start Programs, Food Pantries, Homeless Shelters, County/City Health Departments, and Free Dental Clinics in Appalachia.
7	Seeds for Success		YES	X	X	YES	X	X	YES	X	X	We would like to continue to provide vegetable seeds and young vegetable plants to churches and food pantries so they can give out goods to constituents in need, so they can grow their own gardens and produce their own food.
8	Bubbles Breaking Barriers		YES	X	X	YES	X	X	YES	X	X	We would like to continue to provide personal hygiene goods (toothbrushes, toothpaste, body soap, shampoo, conditioner, lotion, hand sanitizer, razors, shaving cream, etc) to homeless shelters and battered women's facilities.

EXHIBIT K

A. Project Start	B. Project Name	C. Project Description	D. Past / Present Provided (Goods/ Services/ Funds)	E. Exact Goods Provided	F. Past / Present Goods Provided to	G. Who Conducts	H. When Conducted	I. Where Conducted	J. How further purpose	K. Total Time spent on this activity	L. % of time spent on this project	M. How is the activity funded	N. Alternate Names - DBA's
1993	Appalachian Secret Santa Project	<p>The first project started by Grandma's Gifts, Appalachian Secret Santa, began as a direct continuation of the holiday giving Emily and her siblings, Zach and Sarah, learned by accompanying their Grandma during their early childhood. In 1993, Emily, Sarah, and Zach organized this project and raised enough funds to purchase gifts for 3 children. Over the years, the project has grown and thousands of Appalachian children referred by social service agencies have received coats, shoes, clothes, books, educational games, and toys Christmas morning. These gifts and the funds to provide them are received from folks living all across the United States, and throughout the world!</p> <p>You have likely witnessed the excitement when a child sees a large stack of brightly wrapped gifts Christmas morning. Now imagine the impact of those gifts when the child opening them was expecting none! Our Appalachian Secret Santa program collects individual items such as new clothing, coats, and shoes for children in need. We also offer our Secret Santa's the opportunity to 'adopt' children from our list and provide items specifically for that child. Children are</p>	In the past and present day, this project provides goods	Clothing, shoes, toys, books, and educational games	Churches and Social Service Agencies in Appalachia	Volunteers of Grandma's Gifts contact individuals (who are friends) looking for people to help by donating time or goods.	Nov 1st through Dec 24th	Goods assembled in Lewis Center, Ohio	<p>Assist children in Appalachia by providing them with goods</p> <p>Ex: Clothing, shoes, toys, books, and educational games</p>	25 hours/week (for 6 weeks, between 6 volunteers. Approximately 900 hours total)	24%	Individuals donate socks, coats, toys, shirts, shoes, games, wrapping paper, and time.	None

EXHIBIT K

		added to our list if they are not receiving Christmas assistance from another area organization and their family has been identified as a family in need. At the core of the many lessons Emily, Sarah, and Zach learned from their Grandma is the importance of helping those in need, especially children at Christmas. Become an Appalachian Secret Santa and help continue the journey of giving.											
1994	Valentines for Veterans	This project is used as a teaching tool for kids with whom we share the call to service. This project lets them see how easily they can touch the lives of others. With supplies such as construction paper, stickers, markers, doilies, crayons, glue, and lots of glitter purchased by Grandmas Gifts valentines have been made by college, elementary, middle, and high school students. These beautiful valentines are then shipped to Appalachian VA hospital and handed out on Valentine's Day to our service men and women.	Goods	Handmade Valentines Cards	VA Hospitals in Appalachia	Volunteers of Grandma's Gifts sort Valentines and send them out. Valentines are made by school children all over the country.	Late January through February 7th	School children from across the country make Valentines and send them to Grandma's Gifts. Grandma's Gifts then sorts and boxes the valentines in Lewis Center, Ohio and then sends them to VA hospitals and VFW's in Appalachia.	To educate people of the world about community service, philanthropy, and opportunities for involvement and provide them with the chance to make a difference.	25 hours total	2%	Schools create valentines using their own art supplies. The children and teachers donate their time making valentines.	None

EXHIBIT K

1995	Spring Clean Book Drive	<p>Spring cleaning, the annual event undertaken by many, has also been turned into an opportunity to help others. Grandma's Gifts began this project as a simple request to friends and neighbors asking them to donate the books they no longer read or the ones their kids had outgrown that were discovered as they cleaned their closets and shelves each spring. Word has spread and the Spring Clean Book Drive has grown into a project resulting in the donation of hundreds of thousands of books to Appalachia. By partnering with community groups to advertise the collection. Fliers are distributed which explain the project and ask for the donation of new or gently used children's books. Collection boxes are placed in local stores, libraries, and community centers. Volunteers then pick up the books, clean, sort, insert book plates, and ship the books throughout Appalachia.. Collections of books have been placed in hospitals, schools, battered family shelters, health clinics, child welfare agencies, head starts, community action organizations, and bookmobiles.</p>	Goods	New and gently used hard and soft back books	Libraries, schools, head start programs, and churches	<p>Volunteers of Grandma's Gifts sort, clean, and box books.</p> <p>Books are collected by school children and donated by libraries from across the country.</p>	June-August	<p>School children and churches from across the country collect books and send them to Grandma's Gifts.</p> <p>Grandma's Gifts then sorts, cleans, and boxes the books in Lewis Center, Ohio and sends them to organizations in Appalachia who need books.</p>	<p>Assist children in Appalachia by providing them with goods (new and gently used hard and soft back books)</p>	<p>5 hours/week</p> <p>(for 8 weeks, 8 volunteers. Approximately 320 hours total)</p>	20%		None
------	-------------------------	---	-------	--	---	--	-------------	--	--	---	-----	--	------

EXHIBIT K

1996	Thanksgiving Turkey Sculpture	<p>Recognizing that so many Appalachian families are unable to celebrate Thanksgiving with a "traditional" dinner in 1996 the Douglas's built a 6ft tall turkey head and tail to creatively collect canned foods. Grandma's Gifts then asked people from the community to help "build" the turkey's body by stacking donated canned food on bales of hay. All the donated food items become the turkey and the goal is to see how many pounds of turkey the community can "grow". When the collection is complete, the food is boxed and the boxes are delivered to needy families, food pantries, and battered women's shelters so that others less fortunate may enjoy a family holiday at Thanksgiving.</p>	Goods	Canned Food and Frozen Turkeys	Church food pantries in Appalachia	Volunteers of Grandma's Gifts as for donations of canned food. Food is then shipped to Appalachia.	November	Grandma's Gifts receive donations of canned food then sorts, and boxes the goods in Lewis Center, Ohio and sends them to organizations in Appalachia.	Assist families in Appalachia by providing them with goods (food)	1 day - 4 hours total (8 volunteers at 4 hours, Approximately 32 hours total)	2%		None
2002	Rainbow Project	<p>After the floods in 2002 that literally washed Appalachian towns down mountainsides ended and the damage was surveyed, it became more apparent that everyone needed some help. In years past Grandmas Gifts has worked to provide book bags and school supplies to Appalachian children, yet it seemed that more people needed help. Thus, the Rainbow Project was born. Everyone enjoys and needs markers, pencils, paper, and a ruler to go back to school in the fall, yet these much needed supplies are expensive and not every family can afford such items. Originally a Make-A-Difference Day project, the Rainbow Project is now an annual Grandmas Gifts event. We collect school supplies for children and schools in need</p>	Goods	Notebooks, crayons, markers, colored pencils, book bags, pencils, pens, paper, scissors, etc.	Elementary and Middle School in Appalachia	Volunteers of Grandma's Gifts sort, box, and ship school supplies.	July and August	Church groups from across the country collect school supplies and send them to Grandma's Gifts. Grandma's Gifts then sorts and boxes the goods in Lewis Center, Ohio and sends them to schools in Appalachia.	Assist children in Appalachia by providing them with goods (new school supplies)	6 hours/week (14 volunteers for 2 weeks, Apprx 168 hours)	13.50%		None

EXHIBIT K

		and distribute them at the beginning of each school year. The donations that started as the light at the end of the storm continue to illuminate the path for students today.											
2007	Trick-or-Teeth!	Grandma's Gifts' believes that kids, who establish healthy habits early in life, will carry that behavior into adulthood. Having worked with health departments in the past, we were greatly disturbed by the number of children without items for proper dental care or access to a dentist. Central Appalachia is number 1 in the nation in toothlessness. Generations of children have grown up accepting cavities and dentures as a natural part of life. Due to the sweetness of Halloween, we decided that there was no better time to raise awareness for proper dental hygiene. We capitalized on the holiday and organized the Trick-or-Teeth! Project in conjunction with Trick-or-Treat. Throughout October we work to collect toothbrushes, toothpaste, dental floss, and mouthwash for distribution to county and city health departments, schools, and service organizations in Appalachia. Trick-or-Teeth! is about changing someone's life one tooth brush at a time!	Goods	Dental floss, toothpaste, toothbrushes, and mouthwash	Schools, food pantries, health departments, and free/reduced price dental clinics in Appalachia	Volunteers of Grandma's Gifts sort, box, and deliver dental items to Schools, food pantries, health departments, and free/reduced price dental clinics in Appalachia	October	Schools, churches, sororities, fraternities, and businesses from across the country collect toothbrushes, toothpaste, and dental floss and send them to Grandma's Gifts. Grandma's Gifts then boxes the goods in Lewis Center, Ohio and sends them to organizations in Appalachia.	Assist children in Appalachia by providing them with goods (toothbrushes, toothpaste, and dental floss)	1 day at 8 hours (45 volunteers at 8 hours, Approximately 360 hours)	30.00%	None	

EXHIBIT K

2009	Seeds for Success	<p>After receiving a thank you note from an Appalachian group that Grandma's Gifts works with, Founder Emily Douglas became aware that the needs in the region were beyond even the things she had seen. The group in Eastern Kentucky wrote, "We have had major layoffs at the Coal Mines here and we have added close to 500 families just in the last few months. We now service over 1500 families. We had our "Community Day" early in April. At Community Day we hand out vegetable/herb seeds to families to grow their own food. We served over a 1000 families. Unfortunately, we ran out of seed packets. We do plant a huge Community Garden so we will be able to give out fresh produce later in the summer on our food pantry day's. We also have a Poultry Program where we hand out chickens so that families can raise them for eggs and meat..." After many discussions internally volunteers decided to start a new program to provide vegetable and herb seeds to families in Appalachia. One solution to hunger is handing people canned food, another is assisting them to produce some of the food they consume. This program then not only helps feed hungry people but increases their self-sufficiency, self-worth, and self-esteem.</p>	Goods	Packets of Vegetable Seeds	Church food pantries in Appalachia	Volunteers of Grandma's Gifts request donations of seeds then pack and send seeds to churches with food pantries.	Spring time - usually in Mid-April	<p>Individuals in Lewis Center and Powell, Ohio donate packets of seeds to Grandma's Gifts.</p> <p>Grandma's Gifts then sends the seeds to organizations in Appalachia.</p>	Assist families in Appalachia by providing them with goods (seed packets)	<p>2 days at 3 hours/day</p> <p>(3 volunteers, Approximately 18 hours)</p>	2%		None
------	-------------------	--	-------	----------------------------	------------------------------------	---	------------------------------------	---	---	--	----	--	------

EXHIBIT K

2010	Bubbles Breaking Barriers	<p>No matter your age, class, nationality, or gender, everyone likes to feel clean. Yet, when you are hungry, shampoo and soap are last on the list.</p> <p>A Head Start volunteer in Kentucky shared the following story. "A little boy showed up at Head Start one morning and he was overly upset, sobbing, pouting, and throwing a tantrum. We weren't sure what to say as he was only 6 years old and refused to answer any of our questions. After an hour of patient questioning he finally shared that one of the other students had taken the shampoo and soap we had given him the day before. He had not had a bath in a while and all he wanted was to wash his hair. What 6 year old cries because they feel dirty? We took him into the bathroom, helped him wash up and gave him another soap and shampoo. He carried them in his pocket for the rest of the day and his attitude changed immediately."</p> <p>Bubbles Breaking Barriers began from this touching story. Due to this story and many others, Grandma's Gifts collects donations of toiletries such as soap, shampoo, conditioner, razors, shaving cream, lotion, deodorant, band aids, q-tips, hand sanitizer, feminine products, and wash clothes, to be distributed throughout Appalachia so that poor hygiene is not a barrier to learning, success, and happiness.</p>	Goods	<p>Shampoo, Conditioner, Lotion, Soap, Band aides, wash clothes, comb, hand sanitizer, and socks</p> <p>Teen bags also get shaving razor, nail clippers, and feminine pads</p>	<p>Schools, food pantries, health departments, free health clinics, and battered women's shelters in Appalachia</p>	<p>Volunteers of Grandma's Gifts sort, box, and deliver goods.</p>	March	<p>Women's clubs and businesses from across the county collect goods and send them to Grandma's Gifts.</p> <p>Grandma's Gifts then sorts, cleans, and boxes the goods in Lewis Center, Ohio and sends them to organizations in Appalachia.</p>	<p>Assist children and the homeless in Appalachia by providing them with goods (shampoo, conditioner, soap, lotion,)</p>	<p>3 days at 3 hours/day</p> <p>(3 volunteers, Approximately 27 hours)</p>	7%		None
------	---------------------------	--	-------	--	---	--	-------	--	---	--	----	--	------

EXHIBIT L

PART VIII, LINE 4a - Attached is a description of the various fund-raising programs the organization will conduct.

Part VIII: Your Specific Activities, Page 6

4a Do you or will you undertake **fundraising**? If "Yes," check all the fundraising programs you do or will conduct.

mail solicitations

Grandma's Gifts plans to send out newsletters, flyers, postcards, etc. through post mail. For an example of a mail solicitation see *Exhibit M*.

These documents will contain:

- a. Information about the Organization: how it was created, its history, its geographic location, its mission, etc.
- b. Information on the Organizations Board Members
- c. Information on the Organizations activities as listed in Narrative
- d. Information about how the recipient of the post mail solicitation information may contribute to further the purposes of the Organization
- e. Information about recipients of goods in Appalachia
- f. Information about internet sources committed to furthering our cause
- g. Information about how to contact the Organization

email solicitations

Grandma's Gifts plans to send email solicitations such as emails and e-newsletters as well as e-announcements of website changes. For an example of an email solicitation see *Exhibit N*.

These documents/letters will contain:

- a. Information about the Organization: how it was created, its history, its geographic location, its mission, etc.
- b. Information on the Organizations Board Members
- c. Information on the Organizations activities as listed in Narrative
- d. Information about how the recipients of the documents/letter may contribute to further the purposes of the Organization
- e. Information about the recipients of goods in Appalachia
- f. Information about internet sources committed to furthering our cause
- g. Information about how to contact the Organization

personal solicitations

Grandma's Gifts plans to conduct personal solicitations through speaking engagements such as meetings, events, conferences and the like to promote the Organizations exempt purpose. For an example of a PowerPoint from a speaking engagement see *Exhibit O*.

During these speaking engagements topics discussed will be:

Form 1023 (Rev. 6-2006) Name: Grandma's Gifts Inc. EIN: 26-3109696

- a. Information about the Organization: how it was created, its history, its geographic location, its mission, etc.
- b. Information on the Organizations Board Members
- c. Information on the Organizations activities as listed in Narrative
- d. Information about how the individuals at the speaking event may contribute to further the purposes of the Organization
- e. Information about the recipients of goods in Appalachia
- f. Information about internet sources committed to furthering our cause
- g. Information about how to contact the Organization

foundation grant solicitations

Grandma's Gifts plans to apply for grants/awards from various private and public foundations that further the mission of the Organization.

accept donations on your website

Grandma's Gifts plans to give donors the opportunity to make donations via the Grandma's Gifts website. This will become an option for donors when the organization receives tax exempt status.

EXHIBIT M

PART VIII, LINE 4a - Attached is an example of the mail solicitations the organization plans to use.



Dear Friends of Grandma's Gifts,

We are writing in hopes of gaining your support for the Christmas Angels Project to brighten the holiday season for Appalachian children in need. This year we are working with an Appalachian battered women's shelter in Scioto County, Ohio to supply gifts to 77 children who have been brought there with their mothers. According to the 2008-2009 Ohio Department of Education District Report Cards, on average 57.03% of children in Scioto County are economically disadvantaged. This compares to the 11.7% Ohio average! After all 77 children have been adopted, we will be working with the Lawrence County Young Professionals to help purchase gifts for 350 Lawrence County children in need.

While many of us are watching our spending this year, remember that many Appalachian children do not have the things we often take for granted such as coats, gloves, and warm clothing for the quickly approaching winter. At Grandma's Gifts we deeply value ALL donors, regardless of age or how much you are able to donate. Everyone has the ability to make a difference and we ask that you join us this holiday to make a difference. Imagine the impact you can make when a needy child sees a large stack of brightly wrapped gifts where they feared there would be none.

How YOU can be a Christmas Angel:

1. Visit the Grandma's Gifts Christmas Angels website (<http://www.GGChristmas.org>) to see the list of 77 children who are available for 'adoption' this year, call (614.388.9007) or email us (info@grandmasgifts.org) with the child you wish to purchase gifts for, shop for your child, and then mail your purchases to Grandma's Gifts.
2. We suggest spending \$65-\$100 per child. These children need the necessities such as new clothes, coats, socks, and gloves. Yet, every child loves toys, thus we would suggest new books or new educational games that DO NOT involve batteries or easily breakable parts!
3. Purchase a gift card to Target -or- make a donation via check to 'Grandma's Gifts' and then we can then shop for you!

Make a donation as a gift or in someone's memory:

Not sure what to give the person who already seems to have everything? Grandma's Gifts does allow for people to make contributions in the name of another person as a gift. It's a wonderful way to both support Grandma's Gifts and solve gift-giving dilemmas. Making a donation in someone else's name is a great way to honor a deserving individual, such as an outstanding parent, friend, teacher, or boss. If you would like to make a donation as a Christmas gift, please notify Grandma's Gifts with the honoree's information by Friday December 18th, so we can get a Christmas card in the mail to arrive before Christmas! For notifications after December 18th, a New Years or Thank You card will be sent.

Thank you for your time! Have a Merry Christmas and a Happy New Year!

Yours in Service,
The Grandma's Gifts Volunteer Team

Grandma's Gifts 444 Green Meadows Dr. W, Powell, Ohio 43065 p:614-388-9007
www.GrandmasGifts.org

EXHIBIT N

PART VIII, LINE 4a - Attached is an example of the email solicitations the organization plans to use.



Making a difference this Fall is as easy as...

saying "Trick-or-Teeth!"

In 1993, at the age of 11, Emily Douglas of Powell, Ohio founded Grandma's Gifts in memory of her Appalachian grandmother, Norma, after losing her to cancer. Grandma's Gifts is an organization that works to provide goods, services, and opportunities to disadvantaged people in Appalachia as well as educate and inspire youth. Projects are designed to allow schools, businesses, scout troops, clubs, individuals, and colleges the ability to make a huge impact with little dedication of staff time or resources, by providing fliers, posters, messaging, etc.

Grandma's Gifts is led by young adults who volunteer their time. Supporters live in more than 10 foreign countries and all 50 US States! Grandma's Gifts has received recognition from President Bill Clinton, Oprah, and featured in [People](#), *Parents*, *Family Circle*, *Seventeen*, and *Black Enterprise Magazine*.

Grandma's Gifts believes that kids, who establish healthy habits early in life, will carry that behavior into adulthood. Having worked with health departments in the past, we were greatly disturbed by the number of children without items for proper dental care or access to a dentist. Central Appalachia leads the nation in toothlessness. Due to the sweetness of Halloween, we decided that there was no better time to raise awareness for proper dental hygiene and organized the *Trick-or-Teeth! Project*. Throughout October we work to collect toothbrushes, toothpaste, and dental floss for redistribution to health departments, schools, and service organizations in Appalachia. Trick-or-Teeth! is about changing someone's life one tooth brush at a time! To learn more go to: www.Trick-or-Teeth.org

Who can make a difference with Trick-or-Teeth?

YOU!- Classrooms, Dentists, Scout Troops, Places of Worship, Businesses, Colleges, Dorms, Groups of Friends, Fraternities, Sororities, Clubs, Teams, Families, Individuals, and more!

How can YOU make a difference with Trick-or-Teeth?

1. Sign up to participate at <http://www.TRTSignup.org>
2. Receive handouts and posters from Grandma's Gifts via email. Change them as you'd like.
3. Set your collection time and then advertise Trick-or-Teeth! to your group, setting out a collection box for new dental supplies!
4. Mail or drop off your goods by October 30th, 2010 to:

MorningStar Mini Storage
c/o Grandma's Gifts, Suite 602
707 Enterprise Drive
Lewis Center, OH 43035

5. Receive a certificate for participating, photos, and copies of thank you notes from recipients!

www.GrandmasGifts.org

For more info:

Visit: <http://www.Trick-or-Teeth.org>

Contact Founder & Executive Director, Emily Douglas

Email: emily.douglas@grandmasgifts.org

Phone: 614 - 388 - 9007

[SUBSCRIBE TO STAY CONNECTED!](#)

©2006-2010 Grandma's Gifts Inc.- Trick-or-Teeth! TM by Grandma's Gifts Inc.

EXHIBIT O

PART VIII, LINE 4a - Attached is an example of a PowerPoint presentation used for personal solicitation.



WHAT WE BELIEVE...

Founded: 1993,
Incorporated: August 8, 2008

Founder: Emily Douglas, age 11

Started: In memory of Norma Ackison, Emily's Appalachian Grandmother, after her death from breast cancer.

Structure: Volunteer Run

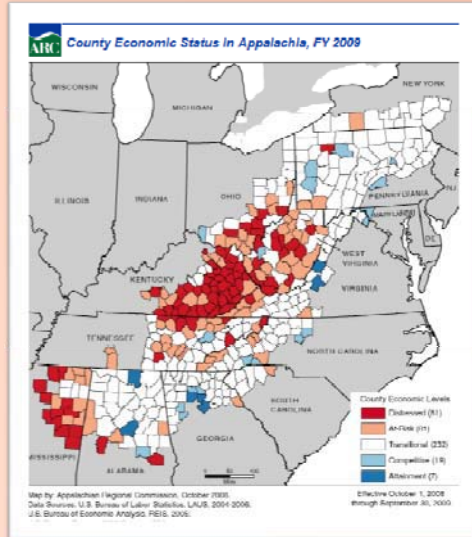
Vision: Grandmas Gifts envisions the end of Appalachian poverty. We wish to educate and assist our way out of "business".

Mission :With the support of the community Grandmas Gifts works to improve the lives of Appalachian families by providing goods, services, and opportunities, while educating people on regional issues and teaching the value of volunteerism.



www.GrandmasGifts.org

APPALACHIA...



Appalachia, as defined by the government agency, the Appalachian Regional Commission, is a "200,000 sq. mile region that follows the Appalachian Mountains from southern New York to northern Mississippi. It includes all of West Virginia and parts of 12 other states." (source: www.ARC.gov)

We serve an area that is economically depressed, experiences rural and urban issues, and is often overlooked by the media and other service organizations.

www.GrandmasGifts.org

APPALACHIA...

Distressed counties rank in the worst 10 percent of the nation, according to ARCs index-based County Economic Status Classification System, which compares each county in the nation with national averages on three economic indicators: three-year average unemployment rate, per capita market income, and poverty rate.

As you can see below, 100% of the Appalachian counties in Kentucky are "at-risk" or "distressed" in comparison to 54.5% in West Virginia and 46.9% in Ohio. Poverty rates in these counties are between 11.4% (Noble County, OH) and 45.4% (Owsley County, KY).

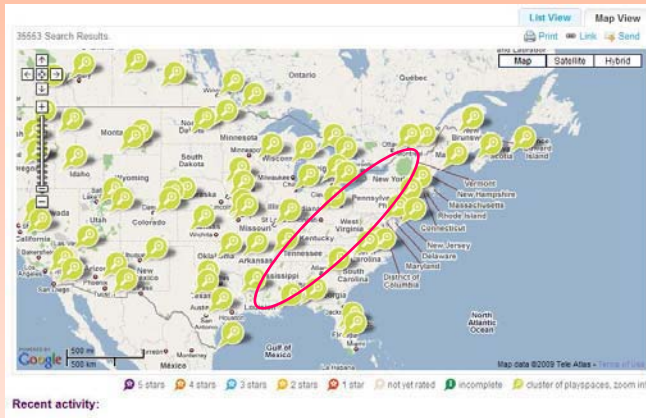
State	# of Counties Distressed	% of Counties Distressed	# of Counties At-Risk	% of Counties At-Risk	Total # Appalachian Counties in State	% of Counties Distressed OR At-Risk
Kentucky	44	81.5%	10	18.5%	54	100.0%
West Virginia	13	23.6%	17	30.9%	55	54.5%
Ohio	6	18.8%	9	28.1%	32	46.9%
Tennessee	8	15.4%	16	30.8%	52	46.2%
Virginia	1	4.0%	6	24.0%	25	28.0%
Pennsylvania	1	1.9%	2	3.8%	52	5.8%
New York	0	0.0%	1	7.1%	14	7.1%

www.GrandmasGifts.org

APPALACHIA... OVERLOOKED

Many organizations do not serve groups in Appalachia as they find difficulty overcoming cultural and distribution barriers. We do not look down on these organization as we too at times experience hardships reaching out.

Below is a recent service area map from a large nonprofit (pulled from undisclosed website on 6/1/2009). As you can see, there are no service locations in the Appalachian Mountains.



This map has not been altered and exists in its original form as found online. The nonprofit that displays this map is not listed to protect their amazing work and heart!

www.GrandmasGifts.org

WHAT WE DO...



-  Provide Goods
-  Provide Services
-  Provide Opportunities
-  Provide A Service Outlet

www.GrandmasGifts.org



GRANDMA'S GIFTS YEARLY PROJECTS:

- Trick-or-Teeth! (Dental Hygiene Supply Collection)
- Rainbow Project (Started this project after destructive Appalachian flooding. We provide school supplies and book bags to children. This project was to be the light at the end of the storm!)
- Thanksgiving Turkey Sculpture
- Christmas Angels Program
- Spring Clean Book Drive
- Seeds for Success
- Valentines for Veterans



TRICK-OR-TEETH!

Started: 2007

Description:

Throughout October, Grandma's Gifts works with local high school, middle school, and elementary school kids to teach them about Appalachia, Grandma's Gifts, and how cool it is to get involved with community service.



TRICK-OR-TEETH!

Project: The kids then work to collect toothbrushes, toothpaste, and dental floss to be sent to Appalachian food pantries, shelters, health departments, dental clinics, and other groups that serve those in need. On Make a Difference Day we then worked to count, Sort, and Pack ALL goods!



OUR ACCOMPLISHMENTS...

THE KIND THE NEWSPAPER LIKES



OUR ACCOMPLISHMENTS...

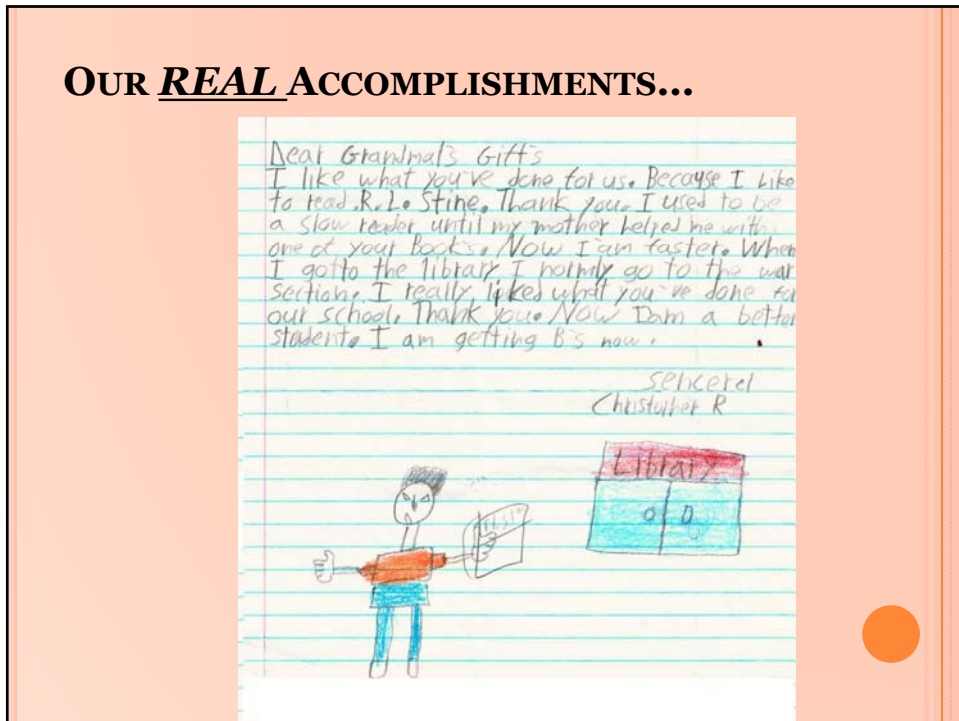
- Facebook Cause with over 926 young supporters
- Podcasts that have been downloaded over 50,000 times
- YouTube videos that have been viewed over 15,500 times
- Recently began to work with the band *Incubus* to spread the word about our cause.
- Run this entire on volunteer hours



OUR ACCOMPLISHMENTS

- December 2008- *People Magazine* Feature
- Presented the Presidents Award for Service by Bill Clinton
- Oprah's Angels
- Appeared in *People*, *Seventeen*, *Parents*, *Family Circle*, *Associated Press* Articles, and more.





3.16.2007

Dear Emily,
I really appreciate you coming to our school. You are one of the most generous and courageous people I have ever met. I know that if people made fun of me for helping the needy I would probably stop because I care what people think about me. I wish that I could be like you! My mom died a few months ago and she was very loving, cared for other people and left a lot of unanswered questions for my family and me. I still give away clothes that I don't wear anymore because my mom said it was nice. I wish that I could be like her, like you! You showed me that you can help and start something like that at an age. —P

I just want to thank you for giving me hope.

Sincerely,
Megan
Worthington Middle School

OUR REAL ACCOMPLISHMENTS...

Ironton ,Ohio 45638
April 28, 1997

Dear Emily,

We have been learning many interesting things and we would like to thank you for Science-by-Mail. Every day I can't wait for science class. Thank you very much.

Your friend,
Sara

OUR REAL ACCOMPLISHMENTS...



OUR REAL ACCOMPLISHMENTS...

Dear Emily Douglas, Grandma's Gifts

It would like to thank you for giving us the money to go to C.O.H., it was really fun. When I grow up, I want to be like you. I want to help children go on trips like that.

Your friend,
Brenna Marie

FOR MORE INFORMATION!

Visit our website: www.GrandmasGifts.org

Grandma's Gifts
P.O. Box 2
Powell, Ohio 43065

Call us at: 614.388.9007



EXHIBIT P

PART VIII, LINE 4d - Attached a list of all state and local jurisdictions in which the organization will fundraise.

Part VIII: Your Specific Activities, Page 6

4d List all states and local jurisdictions in which you conduct fundraising. For each state or local jurisdiction listed, specify whether you fundraise for your own organization, you fundraise for another organization, or another organization fundraises for you.

State or Local Jurisdiction	Fundraising for: own organization, another organization, or another organization fundraises for you
State of Ohio: Delaware and Franklin Counties	Fundraising for Grandma's Gifts

Grandma's Gifts will not be fundraising for other organizations.

Grandma's Gifts will not have other organizations or businesses fundraising for the Organization.

EXHIBIT Q

PART IX - FINANCIAL DATA - The organization has been in existence for less than 5 years, but has completed one tax year. The attached data shows actual financial data for the organization's tax years ending December 31, 2008 and 2009. Reasonable and good faith estimates of financial data is also enclosed for the tax years ending December 31, 2010, 2011 and 2012.

Overall, financial data is enclosed for the partial tax year for 2008 and for four (4) full tax years for 2009 through 2012.

GRANDMA'S GIFTS INC.

EIN: 26-3109696

PART IX - FINANCIAL DATA, PART A - STATEMENT OF REVENUES AND EXPENSES

LINE #	TYPE OF REVENUE OR EXPENSE	TAX YEARS					TOTAL
		8/8/2008 - 12/31/2008	2009	2010	2011	2012	
1	Contribution Income (Cash)	\$ 879.00	\$ 1,706.00	\$ 4,000.00	\$ 6,000.00	\$ 8,000.00	\$ 20,585.00
1	Contribution Income (In-Kind)						
	Gently used Books	\$ -	\$ 240.00	\$ 600.00	\$ 1,200.00	\$ 2,400.00	\$ 4,440.00
	Gently used Clothes and Coats	\$ -	\$ -	\$ 1,000.00	\$ 2,000.00	\$ 3,000.00	\$ 6,000.00
	Gently used Hats and Gloves	\$ -	\$ -	\$ 200.00	\$ 250.00	\$ 300.00	\$ 750.00
	Gently used School Supplies	\$ -	\$ -	\$ 100.00	\$ 200.00	\$ 300.00	\$ 600.00
	Gently used Shoes	\$ -	\$ -	\$ 250.00	\$ 250.00	\$ 250.00	\$ 750.00
	Gently used Toys	\$ -	\$ -	\$ 300.00	\$ 300.00	\$ 300.00	\$ 900.00
	New Art Supplies	\$ -	\$ -	\$ 300.00	\$ 300.00	\$ 600.00	\$ 1,200.00
	New Bedding (Blankets, Pillows, etc)	\$ -	\$ -	\$ 400.00	\$ 500.00	\$ 600.00	\$ 1,500.00
	New Books	\$ -	\$ -	\$ 1,200.00	\$ 2,400.00	\$ 4,800.00	\$ 8,400.00
	New Clothes	\$ -	\$ 2,024.00	\$ 3,000.00	\$ 6,000.00	\$ 9,000.00	\$ 20,024.00
	New Hats and Gloves	\$ -	\$ -	\$ 400.00	\$ 600.00	\$ 1,000.00	\$ 2,000.00
	New Home Items (plates, tables, etc)	\$ -	\$ 15.99	\$ 250.00	\$ 750.00	\$ 1,250.00	\$ 2,265.99
	New Personal Items	\$ -	\$ 296.98	\$ 400.00	\$ 500.00	\$ 600.00	\$ 1,796.98
	New School Supplies	\$ 1,350.00	\$ 3,352.00	\$ 5,000.00	\$ 8,000.00	\$ 11,000.00	\$ 28,702.00
	New Shoes	\$ -	\$ 25.00	\$ 500.00	\$ 1,000.00	\$ 1,500.00	\$ 3,025.00
	New Toys	\$ -	\$ 30.00	\$ 500.00	\$ 1,000.00	\$ 1,500.00	\$ 3,030.00
	Dental Hygiene Items	\$ 2,059.00	\$ 7,119.00	\$ 10,000.00	\$ 15,000.00	\$ 17,500.00	\$ 51,678.00
	Food	\$ 860.00	\$ 386.00	\$ 500.00	\$ 1,000.00	\$ 1,500.00	\$ 4,246.00
	Personal Hygiene Items	\$ -	\$ -	\$ 400.00	\$ 800.00	\$ 1,200.00	\$ 2,400.00
	Seeds- Vegetable	\$ -	\$ 120.00	\$ -	\$ 220.00	\$ 320.00	\$ 660.00
	Hand Made Valentines	\$ -	\$ 150.00	\$ -	\$ 300.00	\$ 600.00	\$ 1,050.00
	Stamps	\$ 79.80	\$ 133.76	\$ 176.00	\$ 264.00	\$ 528.00	\$ 1,181.56
	Supplies	\$ -	\$ -	\$ -	\$ 200.00	\$ 400.00	\$ 600.00
1	Grants	\$ -	\$ -	\$ -	\$ 2,500.00	\$ 5,000.00	\$ 7,500.00
1	Total Contributions & Grants	\$ 5,227.80	\$ 15,598.73	\$ 29,476.00	\$ 51,534.00	\$ 73,448.00	\$ 175,284.53
2	Dues	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
3	Gross Investment Income	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4	Net Unrelated Business Income	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5	Taxes Levied for Your Benefit	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6	Value of Services/Facilities by a Government Unit	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7	Any Revenue Not Listed in Lines 9-12	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8	Total of Lines 1 Through 7	\$ 5,227.80	\$ 15,598.73	\$ 29,476.00	\$ 51,534.00	\$ 73,448.00	\$ 175,284.53
9	Fees for Services	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10	Total of Lines 8 and 9	\$ 5,227.80	\$ 15,598.73	\$ 29,476.00	\$ 51,534.00	\$ 73,448.00	\$ 175,284.53
11	Net Gain or Loss on Sale of Capital Assets	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12	Unusual Grants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

GRANDMA'S GIFTS INC.

EIN: 26-3109696

PART IX - FINANCIAL DATA, PART A - STATEMENT OF REVENUES AND EXPENSES

LINE #	TYPE OF REVENUE OR EXPENSE	TAX YEARS					TOTAL
		8/8/2008 - 12/31/2008	2009	2010	2011	2012	
13	Total Revenue (Lines 10 Through 12)	\$ 5,227.80	\$ 15,598.73	\$ 29,476.00	\$ 51,534.00	\$ 73,448.00	\$ 175,284.53
14	Fundraising Expenses	\$ 243.96	\$ 190.40	\$ 290.00	\$ 390.00	\$ 490.00	\$ 1,604.36
15	Contributions, Gifts, Grants & Similar Amounts Paid						
	Assistance to Individuals (Cash)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	Assistance to Individuals (In-Kind)	\$ -	\$ -	\$ -	\$ 38,070.00	\$ 52,370.00	\$ 90,440.00
	Donations to Other Organizations (Cash)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	Donations to Other Organizations (In-Kind)	\$ 4,269.00	\$ 13,758.97	\$ 25,300.00	\$ 6,500.00	\$ 12,150.00	\$ 61,977.97
	Donated stamps/supplies used by Grandma's Gifts	\$ 79.80	\$ 133.76	\$ 176.00	\$ 464.00	\$ 928.00	\$ 1,781.56
15	Total Line 15	\$ 4,348.80	\$ 13,892.73	\$ 25,476.00	\$ 45,034.00	\$ 65,448.00	\$ 154,199.53
16	Disbursements to or for Benefit of Members	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
17	Compensation of Officers & Directors	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
18	Other Salaries & Wages	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
19	Interest Expense	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
20	Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
21	Depreciation and Depletion	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
22	Professional Fees	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
23	Other Expenses						
	Postage/Shipping	\$ 546.96	\$ 36.40	\$ 1,200.00	\$ 1,600.00	\$ 2,000.00	\$ 5,383.36
	Post Office Box	\$ 44.00	\$ 44.00	\$ 44.00	\$ 44.00	\$ 48.00	\$ 224.00
	Printing	\$ -	\$ -	\$ 250.00	\$ 500.00	\$ 750.00	\$ 1,500.00
	Supplies	\$ -	\$ -	\$ 225.00	\$ 315.00	\$ 400.00	\$ 940.00
	Tax & License	\$ -	\$ -	\$ 125.00	\$ -	\$ -	\$ 125.00
	Telephone (Skype)	\$ -	\$ 32.00	\$ 32.00	\$ 34.00	\$ 36.00	\$ 134.00
	Trucking	\$ -	\$ -	\$ 600.00	\$ 1,200.00	\$ 1,800.00	\$ 3,600.00
	Website Maint., Hosting, Domain names, Email	\$ -	\$ 185.00	\$ 885.00	\$ 625.00	\$ 725.00	\$ 2,420.00
23	Total Line 23	\$ 590.96	\$ 297.40	\$ 3,361.00	\$ 4,318.00	\$ 5,759.00	\$ 14,326.36
24	Total Expenses (Lines 14 Through 23)	\$ 5,183.72	\$ 14,380.53	\$ 29,127.00	\$ 49,742.00	\$ 71,697.00	\$ 170,130.25
	Net Revenue Less Expenses	\$ 44.08	\$ 1,218.20	\$ 349.00	\$ 1,792.00	\$ 1,751.00	\$ 5,154.28

**GRANDMA'S GIFTS INC.
FORM 1023, APPLICATION FOR RECOGNITION OF EXEMPTION**

EIN: 26-3109696

EXHIBIT R

FORM 1023 CHECKLIST - Enclosed is a copy of the IRS correspondence assigning the organization its employer identification number.

Date of this notice: 08-05-2008

Employer Identification Number:
26-3109696

Form: SS-4

Number of this notice: CP 575 E

GRANDMAS GIFTS INC
GRANDMAS GIFTS
% EMILY DOUGLAS
444 GREEN MEADOWS DR W
POWELL, OH 43065

For assistance you may call us at:
1-800-829-4933

IF YOU WRITE, ATTACH THE
STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 26-3109696. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Assigning an EIN does not grant tax-exempt status to non-profit organizations. Publication 557, *Tax Exempt Status for Your Organization*, has details on the application process, as well as information on returns you may need to file. To apply for formal recognition of tax-exempt status, most organizations will need to complete either Form 1023, *Application for Recognition of Exemption Under Section 501(c)(3) of the Internal Revenue Code*, or Form 1024, *Application for Recognition of Exemption Under Section 501(a)*. Submit the completed form, all applicable attachments, and the required user fee to:

Internal Revenue Service
PO Box 192
Covington, KY 41012-0192

The Pension Protection Act of 2006 contains numerous changes to the tax law provisions affecting tax-exempt organizations, including an annual electronic notification requirement (Form 990-N) for organizations not required to file an annual information return (Form 990 or Form 990-EZ). Additionally, if you are required to file an annual information return, you may be required to file it electronically. Please refer to the Charities & Non-Profits page at www.irs.gov for the most current information on your filing requirements and on provisions of the Pension Protection Act of 2006 that may affect you.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

(IRS USE ONLY) 575E

08-05-2008 GRAN O 9999999999 SS-4

IMPORTANT REMINDERS:

- * Keep a copy of this notice in your permanent records. **This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you.**
- * Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- * Refer to this EIN on your tax-related correspondence and documents.
- * Provide future officers of your organization with a copy of this notice.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub. Thank you for your cooperation.

Keep this part for your records.

CP 575 E (Rev. 7-2007)

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address.

CP 575 E

9999999999

Your Telephone Number Best Time to Call
 () -

DATE OF THIS NOTICE: 08-05-2008
 EMPLOYER IDENTIFICATION NUMBER: 26-3109696
 FORM: SS-4 NOBOD

INTERNAL REVENUE SERVICE
 CINCINNATI OH 45999-0023


GRANDMAS GIFTS INC
 GRANDMAS GIFTS
 % EMILY DOUGLAS
 444 GREEN MEADOWS DR W
 POWELL, OH 43065