(Rev. January 2020) Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

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

OMB No. 1545-0047 2019 Open to Public Inspection

<u>A</u>	For the	2019 <u>calendar year, or tax year beginning</u> , and ending						
В	Check if a	plicable: C Name of organization	D Employe	er identification number				
	Address c	German Village Society						
\Box	NI I	Doing business as		**-*	**9645			
	Name cha	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephor	ne number			
	Initial retu			614-	221-8888			
	Final retur							
	terminated	Columbus OH 43215		G Gross red	eipts\$ 609,862			
	Amended	eturn F Name and address of principal officer:						
	Application	pending Darci Congrove	oup return for	subordinates? Yes X No				
		588 South Third Street	H(b) Are all sub	oordinates inc	luded? Yes No			
		Columbus OH 43215						
_				attaon a not	. (666 1161 461616)			
		ppt status:						
_	Website		H(c) Group exe					
		ganization: Corporation Trust X Association Other ▶ L	Year of formation: 1	960	M State of legal domicile: OH			
Р	art I	Summary						
	1 E	riefly describe the organization's mission or most significant activities:						
9		See Schedule O						
an								
ř								
Governance	2 .	heck this box if the organization discontinued its operations or disposed of more than	25% of its not a					
Ō	1			1 - 1	13			
∞ ∽		umber of voting members of the governing body (Part VI, line 1a)		📺				
ţį	4 N	umber of independent voting members of the governing body (Part VI, line 1b)		4	13			
Activities &		otal number of individuals employed in calendar year 2019 (Part V, line 2a)			7			
Aci		otal number of volunteers (estimate if necessary)		6	475			
-	7a⊺	otal unrelated business revenue from Part VIII, column (C), line 12		. 7a	0			
	b١	et unrelated business taxable income from Form 990-T, line 39		7b	0			
			Prior Yea	ar	Current Year			
<u>o</u>	8 (ontributions and grants (Part VIII, line 1h)		9,010	310,756			
Revenue	9 F	rogram service revenue (Part VIII, line 2g)		2,880	11,816			
λé	10 li	vestment income (Part VIII, column (A), lines 3, 4, and 7d)	3,	7,333	111,670			
æ		other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	23!	5,344	41,545			
		otal revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		4,567	475,787			
			,	1,00,	1/3//07			
	1				0			
	1	enefits paid to or for members (Part IX, column (A), line 4)	07	1 020				
Expenses	15 8	alaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	21.	1,938	165,731			
eus	16a F	rofessional fundraising fees (Part IX, column (A), line 11e)			0			
ď	b 1	otal fundraising expenses (Part IX, column (D), line 25) ▶						
Ш	17 (ther expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	37!	5,512	321,518			
	18 T	otal expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	64"	7,450	487,249			
	19 F	evenue less expenses. Subtract line 18 from line 12	9,	7,117	-11,462			
Net Assets or Fund Balances	3		Beginning of Cu		End of Year			
sets	20 ⊺	otal assets (Part X, line 16)	1,604	4,040	1,594,230			
ASS	21 ⊺	otal liabilities (Part X, line 26)	32	2,908	36,161			
S Set	22 N	et assets or fund balances. Subtract line 21 from line 20		1,132	1,558,069			
	art II	Signature Block						
	= =	alties of perjury, I declare that I have examined this return, including accompanying schedules and sta	tomonts, and to th	o boot of m	w knowledge and belief it is			
		ct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer			ly knowledge and belief, it is			
	_, 55.10							
٥.		Cinnahus of officer		D-4-				
Sig	_	Signature of officer		Date				
Here			Darci Congrove Treasurer					
		Type or print name and title						
		Print/Type preparer's name Preparer's signature	Date	Check	X if PTIN			
Paid		Donald Wells	11/13	/20 self-en	□			
Pre	parer	Firm's name		Firm's EIN	**-***1346			
	e Only	6500 Busch Blvd Ste 120		J LIN F	1010			
	•	Galambara 011 42000	_	Ohono r	614-396-8974			
Mar	v tha ID	Firm's address COLUMBUS, OH 43229 S discuss this return with the preparer shown above? (see instructions)	F	Phone no.				
ivia	y uie iR	o diocaso uno return with the preparer shown above? (see instructions)			Yes X No			

	990 (2019) German Villa ç			**-***9645	Page 2					
Pa	rt III Statement of Program									
			nse or note to any lir	ne in this Part III	X					
1	Briefly describe the organization's miss	sion:								
S	ee schedule o									
2	Did the organization undertake any sig	nificant program se	vices during the year whi	ch were not listed on the						
	prior Form 990 or 990-EZ?	Yes X No								
	If "Yes," describe these new services of									
3	Did the organization cease conducting	, or make significan	t changes in how it condu	cts, any program						
	services?				Yes X No					
4	If "Yes," describe these changes on So	pagurad by								
4	4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,									
	the total expenses, and revenue, if any			ariodite of granto and anodation	o to othero,					
		, ,	·							
4a	(Code:) (Expenses \$	237,010	including grants of \$) (Reve	enue \$ 11,816					
S	oo Sahadiila O									
	•									
4b	(Code:) (Expenses \$		including grants of \$) (Reve	enue \$					
	r/z									
4c	(Code:) (Expenses \$		including grants of \$) (Reve	enue \$					
	/A									
	•									
	•									
<i>A</i> ~l	Other program convices (Describe or	Schodulo O)								
40	Other program services (Describe on \$ (Expenses \$	•	of ¢) (Revenue \$	1					
40	Total program service expenses ▶	including grants 237,) (izeveline ф	J					
	a. pg. a oo: 1100 oxpoilooo P									

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		v	
2	complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
•	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	<u> </u>	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			.,
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete</i>	40.		•
	Schedule D, Parts XI and XII	12a		X
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If	406		v
42	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b 13		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
14a	Did the organization maintain an office, employees, or agents outside of the officed states? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	14a		
b	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	140		
	for any foreign approximation O. If "Von." appropriate Calendyla F. Doyla II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X